

NEW HAMPSHIRE DIVISION FOR CHILDREN, YOU'TH, AND FAMILIES





COMPREHENSIVE CHILD AND FAMILY SERVICES PLAN ANNUAL PROGRESS AND SERVICES REPORT

JUNE 30, 2012



Nicholas A. Toumpas Commissioner

Maggie Bishop Director

STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION FOR CHILDREN, YOUTH AND FAMILIES

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June 30, 2012

Nancy Pickett, Child Welfare Specialist Administration for Children and Families: Region I U.S. Department of Health and Human Services JFK Building – 20th Floor Boston, MA 02203

Dear Ms. Pickett:

On behalf of the New Hampshire Division for Children, Youth and Families, I am pleased to provide you with our 2012 Annual Progress and Services Report (APSR) for our 2010-2014 Child and Family Services Plan, (CFSP). The CFSP, or Five-Year Plan, was based on the outcomes of our 2003 Child and Family Services Review, our internal Case Practice Reviews, analysis of administrative data, feedback from staff, youth and families, and a variety of community stakeholders. The development of the CFSP focused on the implementation of our statewide practice model. This APSR provides updates on the development of our practice model and other key initiatives outlined in last year's APSR.

Our agency has a long history of providing coordinated services with other community partners committed to promoting the safety, permanency, and well-being of New Hampshire's children. Along with the 2010 Child and Family Services Review and related Program Improvement Plan, we see our Child and Family Services Plan as a blueprint that will accelerate our ability to effectively serve the needs of children and families in our state.

If you have any questions about this comprehensive plan, please contact Michael Donati, Grants Administrator, at the number listed above.

Thank you for your continued support for this and New Hampshire DCYF's other family-centered initiatives.

Sincerely.

Maggie Bishop

Maggie Budyo

Director

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INTRODUCTION

New Hampshire's public response to the safety, permanency, and well-being of children is framed in the Child Protection Act. This law mandates that New Hampshire's Department of Health and Human Services, acting through the Division for Children, Youth and Families (DCYF); respond to children and families affected by those factors that put children at risk of harm by abuse and neglect.

The 2010-2014 Comprehensive Child and Family Services Plan (CFSP) was established in partnership with community stakeholder advisory panels, DCYF, and the Division for Juvenile Justice Services (DJJS) management and staff. The DCYF Bureau of Well-Being is responsible for the development and monitoring of the CFSP.

Child welfare and child protection are human service endeavors that require continuous self-assessment, critical review and adaptation to new understandings of best practice, legal mandates, and collective social need. The 2010–2014 CFSP is a "living document" that provides purpose and direction, while being adaptive and responsive to the findings of the Child and Family Service Review (CFSR) in August 2010 and development of the subsequent Program Improvement Plan (PIP), as well as ongoing recommendations from internal quality assurance processes, staff, families, and community stakeholders.

In addition to the CFSR, New Hampshire DCYF is in the process of implementing a system wide Practice Model. The 2010 CFSR, PIP, and the Practice Model will be inextricably linked, as the CFSR has informed to a great extent our agencies' strengths, needs, and areas of greatest consistency and inconsistency. DCYF is utilizing this feedback in order to improve all aspects of the broad child welfare system through New Hampshire's Practice Model.

During the past year, DCYF has made significant progress toward the goals and objectives of the 2010-2014 Child and Family Services Plan (CFSP). These goals and objectives, progress made towards achieving them, and steps to be taken over the next year, will be described in detail throughout this report.

This document contains two major sections:

Part one provides an overview of New Hampshire's Child Welfare System, including descriptions of the continuum of services provided to children and families, the structure of the agency administering the Title IV-B and Title IV-E programs (DCYF), and descriptions of the programs and activities for which each bureau is responsible. This includes a complete description of programs and services provided under the Chafee Foster Care Independence Program (CFCIP) and the Education and Training Vouchers (ETV) program as well as the training plan.

Part two outlines which programs and services are funded by Title IV-B funds. This section includes required CFS-101 forms and additional budget information. As part of the 2010

CAPTA Reauthorization, DCYF's <u>CAPTA Plan</u> is included as a separate document from this APSR.

The <u>DCYF Disaster Plan</u>, <u>Disaster Plan Resource Guide</u>, <u>Citizen's Review Panel Annual Report</u>, <u>Annual Report of Education and Training Vouchers Awarded</u> and <u>Health Care Services Plan</u> are included as appendices.

AGENCY ORGANIZATION AND CONTINUUM OF SERVICES

The Division for Children, Youth and Families (DCYF) manages child protective and child development programs on behalf of New Hampshire's children, youth, and their families. DCYF staff provides a wide range of family-centered services with a central goal of meeting a parent's and a child's needs by strengthening the family system. Programs are designed to support families and children in their own homes and communities whenever possible.

Vision

We envision a state in which every child lives in a nurturing family and plays and goes to school in communities that are safe and cherish children.

Mission

We are dedicated to assisting families in the protection, development, permanency, and well-being of their children and the communities in which they live.

Until recently the Division for Children, Youth and Families (DCYF) and the Division for Juvenile Justice Services (DJJS) operated as distinct divisions under the Department of Health and Human Services (DHHS). On June 5, 2012 the two divisions officially merged within DCYF, establishing the Bureau of Juvenile Justice Service within the Division for Children Youth and Families. This aligns the bureaus of child protection and juvenile justice under the umbrella of DCYF and paves the way for our commitment to moving forward with integrated policies and procedures that bring consistency, while continuing to value and preserve the specialized knowledge and practices in Child Protection, Juvenile Justice Field Services and the Sununu Youth Services Center.

Services are provided through the department's ten district offices and two telework units as well as by a variety of service and residential care providers located across New Hampshire. The division's programs have an overall SFY 2011 budget of \$137,205,818 and a staffing allocation of 369 positions.

In their work, DCYF staff engage frequently with other DHHS agencies to coordinate services to address child and family related needs in an integrated and seamless fashion. This close collaboration and partnership includes:

• The Division of Family Assistance to provide childcare services for employment and training in abuse/neglect cases; TANF/ Food Stamp and Medicaid services to eligible DCYF families; and determines program eligibility through the fiscal specialist,

- The Division of Community-Based Care Services, Bureau of Drug and Alcohol Services, to arrange for substance abuse treatment services to families in which children have been found to be maltreated,
- The Bureau of Behavioral Health to arrange for mental health evaluations and treatment services for children and adults in abuse/neglect cases in the community and for the evaluation and treatment of children in psychiatric facilities such as the Anna Philbrook Center,
- The Division of Public Health Services for services such as Maternal and Child Health and the Lead Poisoning Prevention Program,
- The Office of Medicaid Business and Policy to coordinate medical services to DCYF families and to provide services to DCYF families: Healthy Kids medical insurance coverage, Special Medical Services and dental services for children in foster care,
- The Bureau of Developmental Services for Family-Centered Early Supports and services for children with developmental delays and chronic health conditions, and
- The Division of Child Support Services to receive child support for children who are placed in out-of-home care.

The overarching goals of the DCYF 2010-2014 Child and Family Services Plan (CFSP) are centered on the development, establishment, implementation, and evaluation of a system wide Practice Model. Specific goals outlined in the CFSP complement this endeavor. There has been substantial progress made towards the development of New Hampshire's Practice Model.

NEW HAMPSHIRE PRACTICE MODEL

BACKGROUND, DESIGN AND PRACTICE MODEL COMPONENTS

In 2009 New Hampshire was selected by the federal government to receive funding and intensive technical assistance to implement sustainable and systemic improvements to the state's child welfare system. The Division for Children, Youth and Families (DCYF) now consists of three separate bureaus that provide direct child welfare services to children, youth, families and communities. These bureaus include Child Protective Service (CPS), Juvenile Justice Services (JJS) and the Sununu Youth Services Center (SYSC). Each bureau has been involved in using this assistance to establish the New Hampshre Practice Model.

New Hampshire's Practice Model outlines the beliefs and guiding principles that drive the division's approach to providing services. The most fundamental purpose of a Child Welfare Practice Model is to serve as a conceptual map and accentuate organizational ideology that should come together in creating the optimal environment that focuses on the safety, permanency, and well-being of children, youth, and families. With great emphasis in the areas of family engagement, safety and assessment, culture and climate, and restorative justice, the Practice Model will ensure high levels of partnership with families, communities, and stakeholders alike. Furthermore, it is expected that the integrated vision created by the Practice

Model will enhance consistency in service delivery, and practice and policy throughout New Hampshire.

Many aspects of the Practice Model will assist in moving practice forward in New Hampshire. As mentioned in the 2010 and 2011 APSR's, New Hampshire planned to allow flexibility in the model in order to emphasize areas needing improvement that were identified in the 2010 CFSR. Consequently, several practice improvement activities were specifically recognized that would align the Practice Model strategies with the Program Improvement Plan (PIP) as they directly relate to the CFSR findings. These practice improvement activities include Solution-Based Casework, enhancements to safety and risk assessment, Supervisory Standards, Family Team Conferencing (now Solution-Based Family Meetings), Family Assessment and Inclusive Reunification, and the Youth Action Pool. At this point, New Hampshire is well on its way to implementing these, and several other Practice Model activities.

The design of New Hampshire's Practice Model has been an ongoing endeavor and will continue as such, in a fluid model of practice to remain up-to-date with current child welfare trends, research, and best practice. In January 2010, the Practice Model began as a collaborative process with participation from employees representing multiple bureaus within the division. Three separate design teams were utilized for JJS, SYSC, and the remaining bureaus. Each of these design teams worked to ensure that the process was inclusive of all the subtleties within their specific bureaus. The employees that comprised the design teams were instrumental in being the voice for their region and for bringing the design team's work back to their respective offices in an effort to solicit feedback and allow for full transparency into the design process of the Practice Model. Feedback was then honored through group discussions by the design team to consider refinements to the Practice Model. Through the evolution of the design teams the JJS Practice Model expanded from the initial Practice Model with a limited scope of permanency, to develop additional beliefs and guiding principles. Furthermore, SYSC's Practice Model development work in 2012 will include the development of a full Practice Model consisting of beliefs, guiding principles, and strategies that center around Restorative Justice Theory and practices.

From June 2010 until September 2010 the initial design team broke up into small groups to address various areas of focus and to provide suggestions for future best practice improvements. These areas of focus included:

- Family Engagement;
- Key Decision Making;
- Removal and Reunification Criteria;
- Prevention, and
- Culture and Climate.

In September 2010, the full design team reconvened and decided upon the adoption of these recommendations. The group narrowed recommendations and ultimately, the Practice Model's domains, or areas of focus were decided to be Safety and Assessment, Family Engagement, and Culture and Climate. To remain consistent, JJS also adopted those domains. As SYSC's Practice Model evolves, it is expected that their domains will remain consistent with CPS and JJS.

As the Practice Model continued to take form and new practice strategies were implemented, CPS and JJS determined that the "foundation" of their Practice Model will be Solution-Based Casework. Solution-Based Casework is a strategy used to engage families and organize casework to incorporate the best of solution-focused approaches and relapse prevention strategies. The result is a consistent model of case practice that focuses on helping families to achieve their own safety while striving to establish consensus between the division and the family. As SYSC continues to contribute to the Practice Model, it is expected that their practice improvements will be based largely on restorative justice. Restorative Justice Theory is an approach to working with offenders and victims that focuses on repairing the harm that was caused and restoring the offender to the victim(s), their family, and their community.

It is anticipated that the design of the CPS, JJS and SYSC Practice Model will be completed in late 2012. This Practice Model will include consistent beliefs across all bureaus that will be supported by four theories. These theories include Solution-Focused, Family Development, Restorative Justice and Parallel Process Theories. In the future, New Hampshire anticipates that the entire division will share Practice Model beliefs that will reflect a common framework while allowing each bureau to have their own unique guiding principles to support the beliefs, as well as unique practice strategies that support Family Engagement, Safety and Assessment, and Culture and Climate.

FAMILY ENGAGEMENT

Partnering with families and ensuring that they have a voice is at the forefront of our Practice Model. New Hampshire has adopted several key strategies to ensure that the family voice is present at all levels of the organization. Family voice includes partnerships with parents, youth, children, and extended family members, as well as natural supports. To ensure consistency in family engagement practices throughout New Hampshire, and to ensure the highest possible level of engagement, an approach was established that includes Solution-Based Family Meetings (SBFM) (formerly identified by New Hampshire as Family Team Conferencing), Family Assessment and Inclusive Reunification (FAIR), a Parent Partner Program, and a Youth Action Pool.

Solution-Based Family Meetings (SBFM) are formal family engagement meetings that will be held regularly for in-home cases. In these meetings the families are given the opportunity to establish safety plans and provide input for their case plans. One of the major goals of these meetings is to allow families to identify who their natural supports are, and include them in the planning process. Ultimately, this will help families to become more independent and allow them to receive support in their home and in their community. A workgroup was established during the past year, which developed the guidelines and the implementation plan. The creator of Solution-Based Casework is currently developing the training curriculum and statewide implementation will take place from July 2012 through June 2013.

For placement cases, New Hampshire has adopted Family Assessment and Inclusive Reunification (FAIR) meetings. These meetings are held periodically and include a format that encourages family voice through family engagement. Permanency planning for children and

youth in placement begins at the time of placement and continues until a permanency plan is achieved. Engaging families and youth in decisions about permanency increases the likelihood of a successful permanent plan for the child or youth. FAIR was initially implemented in January of 2011 and DCYF's Well-Being Bureau has conducted ongoing evaluation of the effectiveness of these meetings. Ongoing evaluation will continue in the form of Family Satisfaction Surveys and continued monitoring of meetings throughout the state.

To ensure that family voice is prevalent throughout the division, a Parent Partner Program and a Youth Action Pool have been developed. During the past year, CPS, JJS and SYSC consulted with youth and parents in several ways including the development of the Practice Model, the development and updating of policies, and the development of case practice strategies. During the next year, the division anticipates transitioning from utilizing youth and parents largely in consultant roles to working side-by-side with youth and parents throughout CPS, JJS and SYSC.

A Youth Action Pool has been established by the Practice Model Youth Consultant and DCYF's Adolescent Program Specialist to ensure that the youth voice is integrated throughout the organization. Youth participating in the Youth Action Pool are able to positively influence CPS, JJS and SYSC adolescent practices by making themselves available to the organization. Youth are able to assist others throughout the state by acting as trainers, panelists, committee members, practice consultants, facilitators, and youth mentors. In addition a former youth in CPS and JJS care is currently working in DCYF's Bureau of Organizational Learning and Quality Improvement as a part-time consultant for the division.

A Parent Partnership Strategy has been established by the Practice Model Parent Consultant and DCYF's Parent Leadership Coordinator to ensure that the parent voice is provided throughout the organization. Several programs have been initiated over the past year related to parent engagement including Better Together with Birth Parents, Strategic Sharing, a father engagement pilot, and strategies to assist in engaging incarcerated parents. Although the long-term goal of the Practice Model is to have a parent working in each of the division's district offices, currently one parent is in a consultant role and works in the Bureau of Organizational Learning and Quality Improvement on a part-time basis.

SAFETY AND ASSESSMENT

Through New Hampshire's Practice Model, the prevention of child abuse and neglect will be enhanced with the implementation of improved assessment and planning tools. With a strong commitment to adopting a solution-based foundation and due to the changing needs of the population New Hampshire serves, New Hampshire's Structured Decision Making Model (SDM), CPS's Case Plan, and enhanced safety/danger definitions will be addressed.

NEW HAMPSHIRE INTEGRATED ASSESSMENT MODEL

The New Hampshire Integrated Assessment Model (NHIAM) has evolved as the division's primary strategy to ensure that accurate, timely, and ongoing safety and risk assessment tools are utilized statewide in child protection to guide case decisions and engage families in a meaningful

way. The implementation began with a focus on revising the existing Structured Decision Making (SDM) model, in use since 2001 in New Hampshire, to align with more current practice philosophies and updated research, as well as enhance the integration of the tools into daily decision-making in the field. In order to align the SDM model with New Hampshire's Practice Model beliefs and guiding principles, New Hampshire planned to explore and integrate the Signs of Safety assessment framework with SDM, as has been done in many child protection jurisdictions. As the initial implementation planning process progressed, New Hampshire was also moving through its implementation of Solution-Based Casework (SBC). As staff and administrators became more familiar with SBC, it became clear that in order to support an effective implementation of both strategies, a more integrated model was necessary. Additionally, as New Hampshire gained more familiarity with the Signs of Safety framework, areas of practice emerged that could be complimented and enhanced by that framework, as well as areas of significant overlap with Solution-Based Casework. Recognizing these needs, New Hampshire consulted with developers and experts regarding these three models and their existing and potential integration. As a result of this, New Hampshire is proud to move forward with an implementation plan that will blend Solution-Based Casework, Structured Decision Making, and safety-informed practice in an assessment model to be used in all phases of child protection work to assess safety, risk and needs in partnership with the family.

The NHIA Model and implementation plan was developed by a representative workgroup of administrative and field staff that began work in February of 2011 and continued throughout SFY 2012. The group sought education and consultation from developers and experts regarding the three models that would become components of the Integrated Assessment model. An initial implementation plan was developed to revise the SDM tools, incorporate Signs of Safety, and increase tool integration into practice decisions. The plan also included communication and training components.

Between June and November of 2011, DCYF contracted with the Children's Research Center to revise New Hampshire's existing SDM model. These revisions incorporated evolved research and practice findings, New Hampshire Practice Model beliefs, and language and concepts informed by Signs of Safety and Solution-Based Casework.

Following these initial revisions, a subcommittee of the workgroup met between November and May of 2012 to integrate the revised SDM tools into an assessment tool guided by Solution-Based Casework concepts, in consultation with the Children's Research Center and Dr. Dana Christensen. This work included members from New Hampshire's information systems and technology departments, and resulted in Business and Functional Requirements for development of this assessment model within New Hampshire's SACWIS system. In collaboration with information systems staff, specific strategies were included to enhance the usage of the assessment model in real time casework decision-making, such as the following:

- System reminder to complete a safety assessment upon entering the initial contact with a child victim;
- System requirement to complete a safety review at least every fourteen days as long as danger exists in child's home;

- Ability to complete safety/risk/needs assessments on a second parent's household as needed;
- System requirement to complete a re-assessment at least every ninety days during an ongoing case; and
- Ability and policy requirement to continue to assess safety/risk/needs on primary family post-permanency until a Termination of Parental Rights (TPR) has been granted.

The DCYF Child Protection staff are currently in the initial stages of implementation of the new model. Beginning in March 2012, staff in the Laconia District Office began piloting paper mock-ups of the model, providing feedback to the workgroup, with additional offices scheduled to begin pilots in June 2012. Also in June 2012, the large workgroup reconvened and was introduced to the full model. The same introduction will be presented in all district offices during the summer of 2012.

Statewide release of the Integrated Assessment Model into New Hampshire Bridges information system is expected in the late fall/winter of 2012/2013. Policy, training, and stakeholder communication plans are underway in the workgroup. It is anticipated that quality assurance process and data availability will continue to drive implementation and fidelity of the model as we move into 2013.

In an effort to implement Solution-Based Casework into the ongoing assessment process, CPS has updated their case plan to include Solution-Based Casework components. Several items designed to assist workers in organizing their cases, engaging families, identifying strengths and protective factors and utilizing relapse prevention techniques have been included. A Practice Model subgroup worked to develop the new case plan and it is being piloted at this time. CPS will be finalizing the case plan and implementing it statewide later in 2012.

Through the Practice Model, New Hampshire has also established consistent definitions to help to clearly and consistently differentiate between safety, risk, and danger. These definitions were articulated to each district office within CPS and JJS, and a policy was developed to support the consistent use of language.

Finally, JJS anticipates the development and implementation of an enhanced risk assessment as a component of the Practice Model. The JJS Design Team will discuss the logistics of developing this new risk assessment tool and will likely develop a subgroup to work on the development and rollout. New Hampshire anticipates that this process will begin in August of 2012.

CULTURE AND CLIMATE

Culture and Climate is a substantial area of our Practice Model's focus. Solution-Based Casework and Supervisory Standards and Training are areas that have been addressed through our Practice Model in the area of Culture and Climate. These strategies will ensure that our organization's philosophy and practices will be consistent with our Practice Model's beliefs and

guiding principles. Solution-Based Casework was chosen to be the foundation of Child Protective and Juvenile Justice Services' Practice Model and influences many areas of practice.

Solution-Based Casework has been integrated throughout CPS and JJS. Solution-Based Casework combines solution-focused techniques with relapse prevention strategies in an effort to help families to focus on their strengths, supports, and protective factors while helping to hold them accountable through skill acquisition and adherence to collaboratively developed family plans. Interactions call for the positive engagement of individuals as well as the continued focus on finding solutions to problems, rather than focusing on the problems themselves.

Additional trainings and ongoing support is currently being offered to the field in an effort to continue to assist with ongoing quality improvements in Solution-Based Practice. Furthermore, the Practice Model is being evaluated based on the successful integration of Solution-Based Casework. The evaluation plan examines the fidelity of practice in relation to the Solution-Based Casework model as well as outcome measures to evaluate the effectiveness of services. Solution-based interactions have been integrated into the statewide supervisory standards and will keep the focus of supervision consistent with the Practice Model. Statewide consistency will also be emphasized through enhanced core and related training with a centralized focus.

To ensure that support opportunities are available for supervisors to assimilate and accommodate the Practice Model beliefs and guiding principles into supervision with staff, supervisory standards were established and statewide training of CPS and JJS Supervisors and Field Administrators has been accomplished. As mentioned, these supervisory standards will ensure that the interactions that supervisors have with staff will be consistent with Solution-Based Casework and involve a high level of staff and family engagement. Furthermore, it is expected that statewide supervisory standards will decrease job ambiguity and ensure that the Practice Model is successfully implemented statewide. Consequently, this is a key component of the sustainability of New Hampshire's Practice Model.

RESTORATIVE JUSTICE

Restorative Justice Theory was identified as a theory that will support New Hampshire's Practice Model in early design teamwork in 2010. Since SYSC's involvement in the Practice Model Design Process, Restorative Justice Theory and practices have been selected as the foundation of their Practice Model. Restorative Justice is an approach to working with offenders and victims in an effort to repair the harm that was caused and ultimately restore offenders to their victims and to their communities. Restorative Justice Practices will be identified, trained, and implemented in SYSC in 2012. During that time, SYSC will develop a capacity to train others in the use of these practices. In 2013, SYSC personnel will train JJS and CPS staff in Restorative Justice and these practices will begin to be utilized in the field.

2010 CHILD AND FAMILY SERVICES REVIEW

The federal Child and Family Services Review (CFSR) took place in August 2010. The review sites were the Littleton, Conway, Portsmouth, and Manchester District Offices and the State

Office. The Administration of Children and Families (ACF) summed up the agency's work, since the last review in 2003, acknowledging efforts of agency leadership which has led to the culmination of a vision that cherishes children, families, and their communities and values and supports the agency workforce. In addition, the DCYF/DJJS Director expressed that the focus and commitment to relationship building, transparency, and the influence of being a learning organization positively contributed to the successful transformation that has taken place over the past five years, as evidenced in the 2010 CFSR findings. In addition, New Hampshire DCYF met or exceeded national standards for the following:

- Absence of Recurrence of Maltreatment;
- Absence of Maltreatment of Children in Foster Care;
- Timeliness and Permanency of Reunification;
- Timeliness of Adoptions;
- Achieving Permanency for Children in Foster Care for Long Periods of Time; and
- Placement Stability.

SAFETY OUTCOMES

The CFSR findings resulted in an immediate review and eventual revision of the Intake and Assessment policy to ensure timeframes for commencing assessments were clearly defined and to standardize field responses to abuse and neglect allegations. Considerable efforts have been made and continue to focus on cross-agency consultation and collaboration when a family/youth are involved with both DCYF and DJJS. To achieve improvement, Child Protective Service and Juvenile Justice Staff training has been conducted to emphasize family engagement skills, effective assessment, and safety planning.

Following the CFSR, a monthly supervisory report was created to enable the Central Intake Unit Supervisors and Administrators to review data in a variety of areas including timeliness of screening in/out reports and timeliness of assigning screened in reports to the local district office. It has proven to be a beneficial tool to allow for the opportunity to review trends by worker and supervisor as to numbers of reports taken and determinations made.

Additionally, a practice review of the Central Intake Unit (CIU) is being planned by the Bureau of Organizational Learning and Quality Improvement. This will provide another opportunity to assess performance, review the work of Central Intake and recommend changes to improve practice and overall outcomes for children and families.

PERMANENCY

Many new initiatives and improved permanency planning practices were identified as strengths in the CFSR. Permanency planning in New Hampshire encompasses a broad look at the entire family unit to achieve better long-term outcomes through facilitated and planned treatment and services. However, the CFSR noted that the focus on the entire family is not consistent in

practice statewide and therefore is captured in the New Hampshire Program Improvement Plan (PIP) through various family engagement strategies and Solution-Based Casework as part of the agency Practice Model.

A primary area of focus on permanency practice improvement is toward the safe and timely achievement of permanency for children. In the New Hampshire PIP, DCYF requested technical assistance for consultation to identify barriers to best practice related to concurrent planning and recommend strategies to address them. In addition, New Hampshire made a request for training resources to increase knowledge of, and strengthen practice in effective concurrent planning. The PIP permanency efforts also focus on activities that promote the continuity of children's family relationships while they are in foster care.

WELL-BEING

The 2010 CFSR determined that the agency was effective with regard to ensuring frequent and high quality caseworker visits with children, ensuring that the needs of children were assessed and addressed consistently, and involving children, in foster care, in case planning. Another significant practice noted was the effectiveness of workers ensuring that the needs of foster parents were assessed and addressed consistently.

While New Hampshire has a strong history of engaging families throughout the state a formal family engagement model, Solution-Based Casework, was identified and implemented as a PIP strategy to further promote this practice to improve well-being outcomes. Enhanced targeted training curricula have been developed to focus specifically on the engagement of absent and incarcerated parents. In an effort to more fully understand the needs of the youth and family members, DCYF has initiated Youth Action Pools and parent leadership opportunities to allow for consistent communication and open feedback on all aspects of child welfare and juvenile justice practice statewide.

TECHNICAL ASSISTANCE

In December 2010, a technical assistance request was made to the Training and Technical Assistance Center and the ACF Regional Office. A consultant, Cynthia Ximenez, from ICF International, was identified to provide the technical assistance outlined in the New Hampshire PIP related to permanency planning case practice in Juvenile Justice Services.

A comprehensive training of all levels of Juvenile Justice Service staff was conducted in two sessions in October 2011. The training titled, "Strengthening Juvenile Justice Practice: Enhancing the Foundation for Permanency", focused specifically on permanency planning practice, including the use of kinship care as a resource for children involved in the child welfare system. In addition, a thorough review of the permanency outcomes as identified in the Child and Family Services Review was conducted using group exercises, case review tools, and discussion. Emphasis was placed on case practice activities that have been designed to preserve, strengthen, and reunify the family.

Additional training for Juvenile Justice Service District Office Supervisors and Field Administrators was created and facilitated by Ruby Johnston, Benchmarks for Effective Supervisory Training (BEST). The training was planned to rollout the Supervisory Standards for CPS and JJS statewide as the primary strategy to achieve consistency in practice. The trainer incorporated Solution-Based Casework language and practice in the Supervisory Standards Training curriculum. All JJS Supervisors participated in this five-day intensive training in January 2012. CPS supervisors received the same training earlier in the year.

In summary, the New Hampshire Program Improvement Plan was approved in August 2011. The PIP details DCYF Practice Model strategies already in development with planned implementation during the PIP period.

PROGRAM IMPROVEMENT PLAN

New Hampshire DCYF was required to address CFSR Performance Items 1, 3, 4, 7, 10, 17, 18, 19 and 20 in developing its Program Improvement Plan. The agency had met all the Round Two CFSR National Standards and therefore was not required to establish improvement goals for any of the standards.

The Program Improvement Plan was approved in August 2011. Over the two-year period of the PIP, the agency will use a targeted approach for the rollout and implementation of action items identified. The rollout process was strategically planned to utilize four district offices as Advanced Practice Sites (APS) to monitor and evaluate the effectiveness of action steps and make revisions prior to expanding the practice changes statewide.

The APS selected for the PIP include the Rochester, Berlin, Manchester and Southern District Offices. These offices were selected as it was determined they would provide the greatest opportunity for change through the rollout of Practice Model strategies at a pace that would allow for continuous quality improvement.

Following the 2010 CFSR, New Hampshire identified two major themes for improvement. These are:

- Establish and sustain statewide consistency in practice with children, youth and families;
 and
- Expand and integrate family engagement at every stage of service delivery.

To accomplish progress with consistency in practice and enhanced family engagement, six practice improvement activities comprise the PIP action steps. The Practice Model domains anticipated to have the biggest impact on outcomes and therefore incorporated in the PIP were the implementation of Signs of Safety and the refinement of Structured Decision Making (SDM) in the **Safety & Assessment** domain; Solution-Based Family Meetings (SBFM), Family Assessment and Inclusive Reunification (FAIR), and the Youth Action Pool in the **Family Engagement** domain; and Solution-Based Casework (SBC) and Supervisory Standards & Training in the **Culture & Climate** domain.

The CFSR final report also indicated that improvements needed to be made to the court hearing notification process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care. While the New Hampshire court system bears the responsibility for notice of hearings there are many systemic challenges that interfere with their ability to follow through consistently. Therefore, a statewide process to send out a notification of court hearings letter to youth, foster, pre-adoptive, and relative caregivers in a timely manner was created.

BUREAU OF CHILD PROTECTION

The Bureau of Child Protection's primary responsibility is to provide program oversight and direct intervention in response to reports of child maltreatment. Child Protective Service Workers (CPSWs), with consultation, direction, and support from their supervisors and administration work with families to help prevent further harm to children from physical or mental injury, sexual abuse, exploitation, or neglect by a person responsible for a child's health or welfare. The goal of this intervention is to ultimately strengthen the family unit. This is accomplished through the assessment of child maltreatment reports, referrals to community supports and prevention programs, and linking families to more intensive in-home services as needed to prevent the removal of children from their homes. If a child cannot be safely maintained in their home, child protective staff are then responsible for taking action to secure the safety of the child and this may involve court action. Child protection staff are responsible for placing the child, case planning, and service provision. The primary goal in placement cases is to reunify the family. The child protection staff are also responsible for concurrent planning with the family to identify alternative permanency options when reunification is no longer the goal.

Services from DCYF can be provided in a variety of ways including:

- Referrals to prevention services including community supports and family resource centers;
- Short-term intervention by the CPSW and facilitated referrals to community providers when there is a suspicion of abuse or neglect;
- Non court-involved cases, in which DCYF works with families when child abuse or neglect has been substantiated and willingly acknowledged by the parent; or
- The filing of abuse and neglect petitions requesting intervention under the court's authority for purposes of child placement, termination of parental rights, or other circumstances requiring legal resolution.

CHILD PROTECTION FIELD SERVICES

Child Protective staff engage with families to assess the safety of children, identify strengths and needs, and when necessary, develop a case plan that is solution-based and designed to assist the family in managing those situations that resulted in DCYF becoming involved with them. This solution-based case plan identifies the family developmental stages, tasks and challenges the

family is facing, risk factors, and family needs and successes. It defines the objectives and outlines the actions and tasks that will be taken by the family, extended family, DCYF, and community service providers. The ultimate goal is to assure the child is not in danger residing in their parents' care and that the family receives the supports and services they need to strengthen the family unit.

The Child Protection Administrator and three field administrators provide consultation, coaching, monitoring, oversight, and support of business operations in the ten district offices, a Telework Unit assigned to the Southern District Office and a fully operational Telework Office in Littleton. Oversight of the Central Intake Office is also provided. District Office Supervisors, Assistant Supervisors, and Child Protective Service Workers (CPSWs) comprise the direct field staff working with the children, families, and providers within the community.

Central Intake

DCYF's Central Intake Office receives approximately 20,000 telephone calls annually regarding concerns of child maltreatment and requests for child welfare related information and service referrals. The CPSWs and Supervisors at the Central Intake Office are responsible for determining if there is sufficient information to indicate an assessment is warranted. Approximately 8,700 reports were accepted for assessment in SFY 2011 and sent electronically to the appropriate district office or telework unit, where a protective investigation begins within 72 hours.

Assessment

Assessment CPSWs conduct a comprehensive assessment of each report of alleged child abuse and neglect received from Central Intake. At the conclusion of the assessment, the CPSW, in consultation with their supervisor and staff attorney, determine if there is sufficient information to substantiate the report, therefore making a finding, either administratively or by filing petition(s) with the court. If the determination is unfounded, DCYF will end their involvement with the family and will recommend community-based services and supports that meet the needs of the family, when necessary. The table below illustrates that DCYF has seen an increase in the number of protective reports received and in the number of children and individuals being served.

| Assessments | | | | |
|-----------------------------------|----------|----------|----------|----------|
| | | | | |
| | SFY 2008 | SFY 2009 | SFY 2010 | SFY 2011 |
| New Assessments open in a year | 7,967 | 7,865 | 8,183 | 8,712 |
| Children served in any open | N/A | 18,000 | 18,270 | 20,465 |
| assessment during the year | | | | |
| Individuals involved in an | N/A | 41,000 | 42,552 | 48,210 |
| asssesment at any time during the | | | | |
| year (including children) | | | | |

Family Services

Family Services CPSWs work to preserve the family unit and reduce the risk of child placement by using strength-based approaches to build upon the skills recognized by the parent(s) and arranging for more intensive therapeutic in-home services, when necessary, to keep the family together. For all open cases, the Family Services CPSW engages the family in developing a case plan. The case planning process provides the opportunity for the family, their children, if age appropriate and the CPSW to identify specific goals and services aimed at increasing the parent's capacity to keep their child safe from further harm. For children in out-of-home placement, the CPSW makes concerted and reasonable efforts to reunify the family while also providing support to the foster or relative home throughout the case. Again, this is done through the case planning process and requires the CPSW to develop a concurrent plan with the family in the event reunification cannot occur and take action to ensure the concurrent plan can be implemented in the event it is needed.

DCYF has progressively served more families each year while the number of children in out-of-home placement has remained low. New Hampshire is seeing significant decline in both number and rate of children in out-of-home care. The rate in care is defined as the number of children in care per thousand children in the New Hampshire population. Both number and proportion of children served in their own homes has been increasing since 2006. Although in the last year DCYF did see a slight drop.

| Family Services | | | | |
|----------------------------------|----------|----------|----------|----------|
| | | | | |
| | SFY 2008 | SFY 2009 | SFY 2010 | SFY 2011 |
| Cases open at any time during | 2,681 | 3,406 | 3,362 | 3,314 |
| the year | | | | |
| Children served in a family | 3,836 | 4,612 | 4,848 | 4,745 |
| service case at any time during | | | | |
| the year | | | | |
| Individuals involved in a family | 10,598 | 12,207 | 12,223 | 12,037 |
| service case at any time during | | | | |
| the year | | | | |
| Children in placement at any | 1,392 | 1,228 | 1,093 | 986 |
| time during the year | | | | |
| Rate of Children in Out-of- | 3.23 | 2.69 | 2.4 | N/A yet |
| Home Placements | | | | |
| Number of Children Served in | 1038 | 1140 | 1284 | 1052 |
| In-Home cases | | | | |
| % of Children Served in In- | 43% | 48% | 54% | 52% |
| Home cases | | | | |

Foster Care Licensing

CPSWs in the district offices, known as Resource Workers, are responsible for licensing resource families in their catchment area. Resource workers collaborate with out-of-home placement providers, including relative caregivers and foster parents, as well as the CPSWs to identify resource family homes to provide a safe and stable family for children who cannot safely be cared for in their own homes. The Resource CPSWs in the district offices recruit; train and license foster families, and match children in need of out-of-home care with a resource family best suited to meet the specific needs of each child. The Resource Workers in each office also work closely with the Foster Care Program housed in the Bureau of Community and Family Support Services.

Special Investigation Unit

The DCYF <u>Special Investigations Unit</u> (SIU) assesses all reports of alleged abuse and neglect in foster homes and residential facilities. SIU determines whether the allegations of abuse or neglect are founded or unfounded and, if necessary, will make recommendations to the agency or facility to resolve identified issues and/or concerns related to child safety. These include, but are not limited to, foster parent support, staff training, or the development and oversight of corrective action plans. This unit is housed in the Bureau of Organizational Learning and Quality Improvement and is described in more detail in that section.

CASEWORKER VISITS WITH CHILDREN

Data submitted for FY 2011 indicated that New Hampshire did not achieve the projected target of children in out-of-home care required to be seen. The actual percentage achieved for such visits was only 84 percent (target 90%)-a difference of six percent.

As a result of this finding, New Hampshire DCYF has been addressing the need to improve caseworker visits through several organizational strategies. First, conversations across the agency were conducted with management, supervisors, and practice leaders to heighten awareness of the need to increase the quantity of visits and meet or exceed federal requirements. In these conversations, several specific strategies were identified that would affect caseworker visits including enhanced utilization of supervisory reports to track caseworker visit outcomes by worker, district office, and statewide. Additionally, an expectation was established that caseworker visits with children would be reviewed in weekly supervision, including the documentation of visits in Bridges (New Hampshire's SACWIS system). Finally, New Hampshire's PIP includes targeted improvements on Item 19 – Caseworker Visits with children, so all quality improvement case reviews include a detailed assessment and analysis of worker visits with children both in terms of quantity and quality.

Recent analysis of caseworker visits with children, under the new calculations authorized by ACYF-CB-PI-07-08 for FFY 2012, show that New Hampshire has made substantive progress on improving caseworker visits for the second quarter with DCYF overall percentage (both child protection and juvenile justice cases) being 98.86%.

LEADERSHIP MEETINGS

Following the official announcement of the merge of child protection and juvenile justice service divisions in June 2011, DCYF began bringing together on a monthly basis Child Protection Supervisors and Juvenile Justice Supervisors from across the state with State Office Administrators and Program Specialists. These Leadership meetings provide a unique forum for dialogue, on who we are in our work together, how we want professional skills developed, and how to achieve the goals of safety, permanency, and well-being for children and their families, as well as what actions will demonstrate we are making progress towards those goals.

In an effort to assure the continued integration of services to New Hampshire's children and youth it became increasingly clear that the priorities DCYF brings to the field should be integrated across the delivery system for children and youth. As result of this, in July 2011, DHHS Commissioner Nicholas Toumpas announced that to ensure consistent leadership and direction, the Sununu Youth Services Center (SYSC), in addition to all field services, would report to DCYF Director, Maggie Bishop.

The merge of the Division for Children, Youth and Families and Division for Juvenile Justice Services including SYSC, created opportunities for greater collaboration between the supervisors of each division. Following an initial joint meeting in May 2011, regular joint Leadership meetings began in September 2011 and are facilitated by the Child Protection Administrator and the Juvenile Justice Services Administrator of Field Services. DCYF Director Maggie Bishop frequently participates in these meetings and each month includes a review of data reports. Typically, the morning session of Leadership is a combined meeting and then the supervisors meet with their respective Bureau Administrator in the afternoons. It is anticipated joint full day meetings will begin to occur quarterly as of July 2012. These joint morning meetings have provided an important forum for shared learning and continued discussion regarding field practice including:

- Advancing practice through supervision;
- Leadership and organizational change;
- Parent engagement;
- PIP/PII and case practice review outcomes and action plans, and
- Resource Management.

Afternoon sessions for the Child Protection Supervisors continue to be facilitated by the Child Protection Administrator and have focused on professional development and managing business operations. These sessions include small group discussion as well as large group conversations and have often led to action planning to improve practice in assessment, family services, and permanency. For Child Protection Supervisors in particular this past year has primarily focused on the implementation of Solution-Based Casework (SBC) at the field practice level. Supervisors from each office have shared 'tools' developed to integrate SBC into practice, tips for coaching staff, and conversations regarding challenges, successes, and opportunities to move practice forward.

To assure consistency in practice between divisions the *Standards for Supervision* in child welfare that were created by DCYF several years ago were revised in 2011. This document guides how administrative, educational, and supportive supervision is provided in New Hampshire and incorporates New Hampshire's Practice Model beliefs and guiding principles as well as being solution focused and strengths-based. The substantive changes in the standards were presented in draft form to CPS and JJS Supervisors between June and October and finalized in December 2011. CPS and JJS Supervisors have been trained on these standards and the standards have been incorporated into Supervisor Core Curriculum.

Supervisors are responsible for creating and maintaining a supportive working and learning environment and for open communication, teaming, and accountability at all levels both internally and externally. To that end, the professional development of supervisors is encouraged and supported in a number of ways. These include Leadership meetings, Supervisor CORE training, quarterly peer-to-peer meetings, and specialized trainings offered through the Center for Professional Excellence (CPE).

In July 2011, four staff attended the Leadership Academy for Middle Managers (LAMM). These staff included two JJS Supervisors and two CPS Supervisors. At the February 2012 Leadership meeting the group had the opportunity to present to their colleagues information related to leadership principles, differentiating technical from adaptive work and the components of adaptive leadership. Each of these individuals identified a change initiative related to enhancing child welfare and juvenile justice practice within the agency over the next year. This advanced training will afford them the opportunity to create, develop, and refine the strategies they want to incorporate into practice for both divisions.

SOLUTION-BASED CASEWORK

Following the development of New Hampshire's Practice Model the decision was made to rebuild the agency's organizational foundation on Solution-Based Casework (SBC). This decision required significant training and support to assure fidelity to the model was maintained as it was assimilated into practice statewide. It was determined that full implementation of the SBC Practice Model will be accomplished in five phases, each with advancing expectations in worker and supervisor knowledge, application and skill development. The CPS Field Administrators have lead oversight of the Solution-Based Casework implementation process, including guiding district office implementation plans and working with the Bureau of Organizational Learning and Quality Improvement to monitor Solution-Based Casework success. Solution-Based Casework coaches are identified as Field Administrators, all District Office Supervisors, certain Assistant Supervisors, designated CPSW IVs, Program Specialists, and Bureau of Organizational Learning and Quality Improvement staff. These individuals are key managers of this process and drivers of success of learning transfer.

The five phases of implementation include: training, conceptual, system application, worker certification, and evaluation. Phase I, training, was conducted between May and August 2011. A makeup session was held in November 2011. All CPSW direct care staff, supervisors, certain program specialists, and administrators were trained in Solution-Based Casework. Training included a pre-reading assignment, two days of classroom training, completion of a Knowledge

Check with an 80% or better and a Solution-Based Casework Action Plan. Staff hired after November 2011 will need to attend the Solution-Based Casework two-day training and complete all certification steps under the guidance of a certified Solution-Based Casework coach within one year of hiring.

Approximately 210 CPSWs, 45 Supervisors, three Field Administrators and the CPS Administrator have been introduced to the concepts and clinical case management skills of Solution-Based Casework. In August 2011, supervisors, selected senior CPSW IV staff, Field Administrators and the CPS Administrator participated in the Solution-Based Casework coaching training. Subsequent to this, guidelines were established to begin the process of integrating the concepts of Solution-Based Casework into the daily work of CPS as part of rebuilding the organization's foundation for practice. Field Administrators and supervisors began applying what they learned in the training. Supervisors have guided Solution-Based Casework through practicing case consultations with their individual workers, as well as group case consultations with their team. They have been conducting these sessions on their own or with Field Administrator assistance. In addition, they have participated in monthly coaching sessions with Dana Christensen, Solution-Based Casework expert consultant, so that they can receive feedback on their skills.

During the January 2012 Leadership meeting the afternoon practice discussion with CPS Supervisors included a review of the five phases to Solution-Based Casework implementation: training, conceptual, system application, worker certification, and quality assurance process. Supervisors learned that all phases involve building acceptance and conceptual understanding of Solution-Based Casework by supervisors and staff. They were advised that the CPS Field Administrators are the "anchors" for Solution-Based Casework business practices. Supervisors were also informed that implementation of Phase III – System Application was to begin February 1st. Effective that date all new assessments and new cases will begin to show application of Solution-Based Casework in practice and daily business operations and that documentation should demonstrate such application.

At the February 2012 Leadership CPS Supervisors were provided with an overview of the Solution-Based Casework Certification Plan created by the CPS Field Administrators. All District Office Supervisors and Assistant Supervisors will be certified as Solution-Based Casework Coaches. CPSWs will be certified as SBC Practitioners after demonstrating the ability to integrate the tools of Solution-Based Casework into their daily work with families. All CPS Supervisors were provided with a copy of the Solution-Based Casework Certification Plan subsequent to the meeting. New Hampshire has identified four offices as Advanced Practice Sites for measuring outcomes related to the CFSR PIP. Supervisors and staff in these offices are to be certified in Solution-Based Casework by July 31, 2012. For the remaining offices, all staff will be certified by January 31, 2013.

To assure Solution-Based Casework is fully integrated into practice DCYF action was taken in the fall of 2011 to integrate Solution-Based Casework with Structured Decision Making (SDM). Following the Solution-Based Casework training for all staff and supervisors the decision was made to create a new model of assessing safety, risk and needs with families that aligns with New Hampshire's Practice Model beliefs and guiding principles. Over the course of five months

staff from Child Protection Bureau, Bureau of Organizational Learning and Quality Improvement and the Bridges Information Technology Bureau met to create a new assessment model that integrates the Solution-Based Casework methods of defining problems in the context of everyday family tasks with a safety-informed Structured Decision Making model. The model was designed by a representative group of DCYF Child Protection staff with a lead staff person from the Bureau of Organizational Learning and Quality Improvement, in consultation with the developers of Solution-Based Casework and Structured Decision Making. This new model is also influenced by Andrew Turnell's *Signs of Safety* model. Business requirements have been completed for integrating the new model into the Bridges Information System, which is expected to occur in the late fall of 2012.

At the same time that New Hampshire's Integrated Assessment Model (NHIAM) was being developed, the family services committee under the direction of the Southern District Office Supervisor spearheaded extensive revisions to the case plan. The new case plan format has been designed to include prompting questions for staff to assure that the concepts and principles of Solution-Based Casework are applied when working with families to develop the case plan. The case plan format and instructions have been finalized and are scheduled for release in policy in June 2012.

To assure Solution-Based Casework is fully integrated into practice DCYF is also actively revising internal policies to include language specific to solution-based casework. This is also being done in Core Curriculum modules and DCYF brochures including the Family Rights Brochure and the Community Guide to Reporting Abuse and Neglect.

BREAKTHROUGH SERIES ON SAFETY AND RISK ASSESSMENT

As reported last year following New Hampshire's participation in the New England Regional Breakthrough Series Collaborative (BSC) on Safety and Risk Assessments that concluded in 2010, DCYF "bundled" practice changes to:

- Ensure children are able to visit with their parents within 24 hours of being removed from their homes.
- Include social workers arranging information sharing between youth and foster families prior to placement (About Them / About Me forms).
- Involve birth parents, foster families, and child calling one another (with social worker support as needed) after the first night of placement to support the transition, focus on the child's needs, and ease anxiety.

This "bundled" practice had been established statewide as an expectation when children enter foster care. Many offices have established placement meetings either the day of or the day following a placement to ensure the practice is implemented. In some offices, it has become the norm to invite the parent to accompany the child to the placement when it is determined that this is the most appropriate course of action for everyone involved including the resource parent.

In November of 2011, the six New England States had representatives participate in another convening as a follow-up to their involvement in the Breakthrough Series Collaborative. This convening provided an opportunity to hear what other states have implemented in order to improve their work and attain better outcomes for the children and families we serve. During this meeting, it was recognized that New Hampshire's efforts to provide intentional support for families at the time of placement vis-à-vis the "bundled" practice consistently results in better engagement of parents at the onset of placement.

Current data indicates that of 177 placements tracked 109 had the opportunity to experience the "bundled" practice and all but three parents had a visit within twenty-four hours of placement. In situations where a parent was not available a significant connection was offered to have a visit with the child. Barriers to the intentional support not being successful included the parents refusing the support, not showing up for the visit, being incarcerated, whereabouts unknown, bail orders prohibiting contact, parental hospitalization, or a safety issue precluding contact.

TELEWORK UNIT

DCYF successfully operationalized the first Telework Unit as part of the Southern District Office in September 2010. In August 2011 the Littleton District Office became the first fully operational telework office with business being conducted completely in the community.

The DCYF Southern Telework Unit continues to thrive as a result of their ability to be more accessible in the community. They are presently staffed by one assistant supervisor, four Assessment CPSWs, two Family Service CPSWs, one Resource CPSW, and one staff attorney, all who work from their homes and from the community within their catchment area.

Surveys have shown that both families and community agencies find they have increased communication with staff as a result of teleworking. Data on meeting face-to-face timeframes in both assessment and family service has shown over the past year that all children/youth are seen within policy guidelines, with very few exceptions. Additionally, the ability of staff to maintain low numbers of overdue assessments is enhanced by staff's sense of being more productive.

The staff currently assigned to the Southern Telework unit state that they continue to have a high satisfaction with their job. They report that they feel productive, available, and enjoy the sense of flexibility they have to better meet the needs of children and families in their catchment area.

The planning for establishing a Telework Unit in Littleton was spearheaded by the supervisors and staff who developed a plan for the team's transition from working within an office space in a district office to a home office. Two Child Protective Supervisors and a staff of seven CPSWs all have a home office from which they work when they are not meeting with families and stakeholders in the community. They come together as a staff at least once per month for staff meetings and individual supervision. The creativity and organizational skills of the supervisors and staff, as well as the use of the necessary technology, have enabled these staff to function in an efficient and effective manner.

The data indicates that the Littleton Telework staff has been accessible to families and the community and the level of satisfaction among the families served has been positive. Staff report feeling more productive and they have made a collaborative effort to support one another thus avoiding any sense of isolation in their work. They have daily communication with their supervisors and there has been an increase in field supervision, which has also increased accountability and the level of service to families.

It is anticipated the experience of these telework sites will inform future development of telework opportunities within DCYF and DHHS as a whole over the next several years.

REVITALIZATION OF ASSESSMENT

As stated previously, extensive work has been done on creating a new model of conducting assessments in New Hampshire that will reflect the integration of Solution-Based Casework with Structured Decision Making. It is anticipated that this new model will enable child protection staff to more readily engage parents in safety planning and identifying the actions steps needed to mitigate further risk of harm.

In addition the CPS Administrator, field administrators and district office supervisors continue to review data at monthly Leadership meetings to monitor practice related to the timeliness of initiating assessments. Field administrators routinely discuss district office practice regarding commencing a new assessment during their monthly visits to the district office. District offices have continued to utilize practice strategies put in place to assure timeframes in commencing assessments are being met. These include:

- Southern and Laconia District Offices initiated and have sustained the practice of holding a morning "power meeting"/Pow-Wow" on a daily basis and reviewing with staff what action has been taken/needs to be taken to commence new assessments.
- Berlin, Manchester, Rochester and Southern Assessment Supervisors routinely send out e-mail to staff to remind them of the need to commence assessments within the expected time frame.
- Southern Telework Supervisor has instituted the practice of using e-mail reminders to staff in advance of a three-day weekend that all assessments received in prior to that weekend are to be commenced immediately.

To assist supervisors in monitoring the commencing of assessments the Child Protection Administrator has submitted a Bridges Change Request to the Bridges Project Manager to have "commencing assessment" added to the contact log pick list. This information can then be queried as part of the monthly Assessment Supervisory Report.

RESIDENTIAL TREATMENT REFORM

2012 marks the fourth year of the collaboration between DCYF and Casey Family Programs to work with the residential treatment provider community to reduce lengths of stay and achieve timely permanency for youth in care. New Hampshire's continued spread of the *Framework for*

Collaboration beliefs, principles, and standards of practice at regional and local level with DCYF/DJJS staff, residential providers, parents, youth, and community stakeholders has been the driving force in sustaining work efforts aimed at achieving effective transitions for youth to permanency. Keys to effective implementation have been the work of the two outside consultants, Jen Agosti and Beth Caldwell, and the youth consultant, Emily Quigley.

The annual summit "Youth Permanency: Working Better Together to Spread Success" was held on September 9, 2011. A pre-summit institute was held the evening before with parents and youth representatives to prepare them for their role at the summit. New Hampshire's Practice Model youth consultant, Emily Quigley, led a mini strategic sharing session with them. Youth and parents opened up the event and shared their experiences and insight during the course of the day. Regional teams presented information about the practice changes they have implemented in their local area. Feedback from participants was that the work being tested is truly coming to fruition and that the message regarding the urgency of permanency for youth is becoming clearer to them.

Specific initiatives and goals related to this work and outcomes for 2011 and moving into 2012 are highlighted below:

PARENT AND YOUTH ENGAGEMENT

Since the inception of the Framework it has been recognized that family and youth engagement is a key strategy that must be attended to in order to effectively implement the family and child driven practice standards and achieve permanency outcomes for youth. As stated above parents and youth were active participants at the September summit and regional teams continue to strive to have parent and youth representation at their meetings. The youth consultant hired as part of the implementation of New Hampshire's Practice Model was able to contract with Casey Family Programs for calendar year 2012 and her sustained efforts to bring youth voice and choice to this work are noted below. Of additional importance was to have a parent partner join the Intake Assessment Team in August. This parent has been actively working with the Seacoast Regional Team, participated in the Seacoast region *Better Together with Birth Parents* workshop, and brings to the table her voice for parents who have had experience with DCYF's Juvenile Justice System.

BETTER TOGETHER WITH BIRTH PARENTS

Better Together with Birth Parents (BTBP) workshops occurred in four DCYF offices during 2011. Keene (March), Seacoast (May), Manchester (July), Northern Region (September) and Southern (December). To date forty-eight parents and forty-eight professionals have participated. Six parents and six professional staff served as co-facilitators modeling the partnering that BTBP promotes. All in all, over one hundred people were involved in the implementation of BTBP in New Hampshire in 2011.

Following each BTBP workshop DCYF's Parent Leadership Coordinator facilitated meetings for *Better Together* graduates at their respective local offices to create plans of action to guide the

testing of the partnership tools and strategies that have been developed during the *Better Together* workshops. Twenty-six parent leaders have participated in these activities and continue to serve as practice advisors to local office staff on a variety of day-to-day practice issues. Practice discussions have focused on how to support parents following a removal, how to support children in placement and their parents during the holidays, what are the specific behaviors from staff that support partnering with parents, how to engage fathers through working with mothers and to help mothers shift from being gate keepers into becoming gate openers.

DCYF has committed to sustain the delivery of the *Better Together* workshops in 2012 and beyond as a critical pillar of the Parent Partner Program. To support this effort, on February 22 – 24, 2012, another Training of the Trainer Session for new *Better Together* Facilitators was held. Consultant Ilana Guttman returned to New Hampshire to train a cadre of six parent leaders and six professional staff as Better Together Facilitators. Following the Training of the Trainer session, the Parent Leadership Coordinator facilitated a Coaching and Planning day for all BTBP facilitators on March 6, 2012. This year's goal is to spread opportunities for inclusion of residential and community partners in the workshops whenever possible. Keene had another workshop in March and this included residential staff. This spring Easter Seals also held a workshop at their facility for their staff and parents whose children are placed there. The success of this endeavor and an invitation to explore ways that this can be offered at other residential facilities will occur at the Framework Intake Assessment Team meeting on June 22, 2012. In addition, New Hampshire has incorporated the *Better Together* workshop into the Core Training Academy for new staff. The first session of this was held with new staff and parents recruited to participate in April 2012.

EFFECTIVE TRANSITION FOR YOUTH TO PERMANENCY

Following the invitation of interest sent to residential treatment providers in June 2012, five providers were selected to work with an outside consultant to achieve three goals for youth:

- To engage youth, their families and their communities in planning for transition from residential treatment to permanent family placement;
- To provide normative experiences aimed at teaching developmentally appropriate knowledge and skills for adolescents while in residential treatment and through their transition period back to family and community; and
- To help youth to make permanent connections with adults who will make a lifetime commitment and who can help them successfully navigate the transition to adulthood.

Beth Caldwell and Janice Label facilitated a "kick off" of the youth transition work August 2nd. This work challenged and pushed providers to think differently about how they deliver services and the extent to which they are truly committed to engaging parents and youth as partners in the treatment process. Several promising practices were developed in one or more of the programs including program practices implemented in one or more residential programs and include:

- Eliminate points/levels;
- Began process to hire youth and family advocates;

- Began process to include youth/family members on board of directors;
- Began training on Family Engagement for all staf;f
- Held 'kick-offs' at program and individual unit levels, inclusive of families/youth; and
- Identified 'project leads' in each unit/area and hold weekly meetings with all project leads to ensure implementation of strategic plans.

On December 2, 2011, the residential treatment providers selected to participate in this project came together to present information on the program outcomes accomplished as a result of the work done with the project consultants, Beth Caldwell and Janice Lebel. This daylong event highlighted the extent to which each provider had met the goals articulated in the original invitation to participate. Overall four of the five residential treatment providers were able to effectively demonstrate how their program and business operations were noticeably changed as a result of this process, particularly in regard to youth and parent engagement and the impact this had on program staff.

In an effort to sustain this work Beth Caldwell, Building Bridges LLC, is working directly with three of these intensive residential treatment providers who opted to move forward to develop plans for sustaining the work they began as a result of the intensive consultation provided last year. An internal advisory group comprised of New Hampshire's parent and youth consultant as well as the Child Protection Administrator and CPS/JJS Program Specialists is overseeing this work. These providers presented a workshop at the annual DCYF Conference on May 11th. Leadership staff from these three facilities shared how they have changed practices to focus on permanency through the use of family-driven and youth-guided care. They also shared the challenges they encountered and successful strategies they have used to address the challenges.

Emily Quigley, youth consultant, has maintained an active role in spearheading the inclusion of youth voice in permanency planning and creating opportunities for youth to experience "normalcy" while in DCYF care. Examples of the work with youth she has initiated or sustained thus far this year include:

- Attending permanency planning team meetings (PPT) in DCYF District Office's identified as Advanced Practice Sites in New Hampshire's CFSR Program Improvement Plan;
- Attending Permanency Round Table planning meetings on a monthly basis;
- Maintaining connections with youth through participation in local and statewide Youth Advisory Board meetings to recruit youth to participate in new initiatives, strategic sharing opportunities and local events; and
- Working with the DCYF Adolescent Program Specialist to advocate for and retain support to finalize the plan for youth involved in New Hampshire's Youth Action Team to participate in a three-day training that will result in the documentation of their experiences with the child welfare system through Digital Story Telling.

The youth consultant was also directly involved in creating the *Normalcy Survey* administered to all youth ages fourteen through twenty-one in residential treatment facilities. This survey is

designed to identify ways in which youth are afforded opportunities to experience and/or participate in normal youth activities while in congregate care. Questions asked included the extent to which youth are able to use technology and maintain personal connections to friends and family while at residential programs. Results of the survey have been aggregated into a report that will provide detailed information about youth experience in residential treatment and assist New Hampshire in determining what action needs to be taken to afford youth greater opportunity to experience "normalcy" within those programs.

DATA OUTCOMES

In an effort to strengthen New Hampshire's capacity to measure outcomes the decision was made with the support of Casey Family Programs to improve our use of data by integrating Results Oriented Management (ROM) reports into our system. ROM reports are designed to provide access to current data on CFSR federal outcomes and a range of other performance measures and indicators. To advance this project, New Hampshire had a two-day "kick off" meeting with Terry Moore, ROM developer and his colleague Linda Heimbach and staff from DCYF's CPS, JJS, BOLQI and Bridges IT staff on March 26, 2012. This meeting included a demo of ROM, overview of DCYF practice and focused detailed technical sessions to discuss mapping of DCYF business operations including assessments, defining foster care settings, placement episodes, and child information.

It is important to note that New Hampshire's sustained focus and concerted effort to reduce lengths of stay and achieving timely permanency for children and youth continues to be evidenced by the fact that fewer children are being placed in residential treatment facilities. Between May 2008 and May 2012 the number of CPS children/youth placed in residential treatment was reduced from 161 to 95 and the number of JJS youth from 334 to 208.

BREAKING THE BARRIER: THE TRANSPORTATION-TO-REUNIFICATION PILOT

The Manchester District Office has been able to sustain the employment of a driver since the inception of the program. The pilot is complete and there continues to be a driver available to provide transportation for children and families served by the Manchester office through an open placement case. This program will continue to be supported by the Title IV-B Subpart 2, Promoting Safe and Stable Families grant.

ACCELERATED REUNIFICATION MODEL (ARM)

DCYF remains committed to achieving permanency for children and their families that enable them to secure natural and community supports that will help parents maintain safety and stability for their children. Of the thirty-one cases offered ARM services between June 2011 and May 2012, sixteen resulted in reunification.

Interagency Coordinating Council on Women Offenders

The CPS Administrator continues to sit on the Interagency Council and schedules quarterly meetings with women at the Goffstown women's prison. These meetings are aimed at providing the women with information about services available to them from DCYF and DHHS including services for family members that are caring for their children. Incarcerated women with concerns specific to matters involving their children are encouraged to meet privately with the Child Protection Administrator. Some women have met with the CPS Administrator one time, others multiple times.

INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN

The Interstate Compact on Placement of Children (ICPC) Administrator is responsible for serving and protecting children who are placed across state lines for foster care or adoption. The compact is a uniform law enacted by all 50 states, the District of Columbia, and the US Virgin Islands. It establishes orderly procedures for the placement of children across state lines and fixes legal and financial responsibility for those involved in placing the child.

Timely Home Studies

The Safe and Timely Interstate Placement of Foster Children Act of 2006 included an amendment to encourage timely home studies. A home study is considered timely if "within sixty days after the state receives, from another state, a request to conduct a study of a home environment for purposes of assessing the safety and suitability of placing a child in the home, the state shall, directly or by contract:

- Conduct and complete the study; and
- Return to the other state a report on the results of the study, which shall address the extent to which placement in the home would meet the needs of the child."

In response to this legislation DCYF revised policies and procedures to outline:

- How to effectively evaluate families who are referred by another state for an ICPC Home Study; and
- What is required by the CPSW for supervision of this home, if a placement is made.

DCYF continues to use a monthly report that provides data on ICPC referrals received into New Hampshire and those sent to other states. This report allows the ICPC Administrator to track the timeliness of these home studies.

Reporting period FFY 10 (10/01/10 to 9/30/11)

306 referrals were received and reviewed by the Deputy Compact Administrator

New Hampshire Receiving

• 208 ICPC referrals were received from other states.

- 90 remained in the state office under the ICPC Admin (Private adoptions and residential placements), and
- 118 were referred to district offices for completion of home studies.

Of the 118 referred to district offices:

- Twenty-five were completed within 30 days;
- Forty-eight were completed within 31 60 days;
- Fourteen were completed within 61 75 days;
- Twenty-four were completed in over 75 days, and
- Seven were not completed by end of reporting period.

New Hampshire Sending

- 98 ICPC referrals were sent to other states;
- 46 remained in the state office under the ICPC Admin. (private adoptions and residential placements); and
- 52 were home study requests of which:
 - Four were completed within 30 days;
 - Fifteen were completed within 31 to 60 days;
 - Two were completed within 61 to 75 days;
 - Nineteen were completed in over 75 days, and
 - Twelve were not completed within the reporting time frame.

The following circumstances continue to impact the timely completion of home studies within 60 days:

- Child was already living with the foster/relative family at the time the request was
 received and the caregiver delayed submission of requested paperwork for a New
 Hampshire foster care license to be issued;
- Child was already living in the pre-adoptive home in New Hampshire at the time the request for study was received, and the family did not submit paperwork at the time it was requested;
- Child was placed in a relative home at the time of the adoptive home study request and relatives needed to complete training;
- Significant information was not received at time the request for home study was received from the sending state; e.g., criminal record history of proposed caregiver, certain evaluations, information regarding the type of study needed, etc;.

- As a professional courtesy, the DCYF ICPC Administrator held onto the request until the information was received thus reducing the number of days the local office had to complete the home study once it was assigned;
- DCYF requested a mental health and/or substance abuse evaluation be completed to assess parental capacity to care for the child and was awaiting the outcome and recommendations prior to approving the home study; and
- Availability of staff resources in a local office impacted assignment and timely completion of home study.

DCYF continues to take the following action in an effort to assure timely completion of home studies:

- Requests for home studies that are lacking necessary information to assign to the local
 office will not be assigned to the district office until the ICPC Administrator has received
 the missing information;
- Oversight by the DCYF Field Administrators assigned to the local offices including follow-up with the supervisor and assigned staff to address issues related to incomplete studies;
- Monthly review of data reports that track timeframes for pending home studies and communication with the district offices regarding completion dates;
- Meet with the Resource CPSW'S and supervisors who are generally assigned to complete ICPC home studies around ways to improve timeframes for completing the studies; and
- Conference calls between the ICPC office and the district office CPSW and supervisor around whether a placement may be supported.

MODEL COURT PROJECT

DCYF has been partnering with the New Hampshire Family Division Court for Merrimack County since October of 2008 when Merrimack County was chosen by the National Council of Family and Juvenile Court Judges (NCJFCJ) to become a Model Court Site. The Executive Committee, comprised of two judges in Merrimack County, the Court Improvement Project coordinator, DCYF staff, including the director, and the Director of CASA, began meeting in October of 2008 to set the goals for the project and to broaden the membership to a larger committee of stakeholders including foster parents, parents' attorneys, school representatives, and a mental health clinician. A former youth in care was also invited to participate. In 2012, the committee was expanded to include a judge from Strafford County and the Child Protection Bureau Administrator.

The first goal for the Model Court was to expedite permanency for children by developing new Termination of Parental Rights (TPR) and Adoption protocols. There was a strong belief that the court process could be streamlined and timeframes shortened. In June 2010, the new Adoption and TPR protocols were piloted in the Concord and Franklin Family Courts. Although the initial plan had been to expand the protocols to other courts in 2011, this has been delayed due to a

legislative change in July 2011, which resulted in parents not having attorneys appointed in abuse and neglect cases. This is currently under appeal at the Supreme Court and the expansion of the permanency protocols have been delayed pending the outcome of that appeal.

In 2011 and up to the present time, the Model Court Project has focused on two primary goals:

- <u>Improving APPLA</u> as a permanency goal to ensure that this is the most appropriate goal and that youth who leave the child welfare system have a stronger permanent connection with a primary caring adult and are better prepared for adult living.
- <u>Participation of children and youth in court</u>. The Model Court will encourage the meaningful participation of children and youth in court hearings and will develop protocols that promote this practice.

Two subcommittees were formed in 2010 and this work extended throughout 2011 and into 2012. The director of CASA of New Hampshire, with DCYF and judicial participation, has chaired *The Children in Court Subcommittee*. The Children in Court Subcommittee has completed a draft of the protocols, which were approved by the Model Court Executive Committee and trainings were held for agency and court staff as well as stakeholders on June 24, 2011. These protocols have been implemented in the Concord and Franklin Courts since July 18, 2011. There is ongoing evaluation, including the use of surveys for each group of stakeholders, which has resulted in some minor revisions. The current plan is for an expansion in two more phases to include the remainder of the Family Courts within the state starting with training on September 21, 2012. This training will include eighteen courts. In January of 2013, the remaining ten courts will be trained.

An important aspect of the implementation of these protocols has been the focus on training foster parents and relative caregivers regarding their role. Training has been provided in a variety of settings including the Annual Foster and Adoptive Parent Conference, the Attorney Generals Conference, and the DCYF annual conference. The Court Improvement Project consultant and CASA Director were also able to do a site visit to Idaho to learn more about children and youth attending court hearings in that state.

APPLA Model Court Subcommittee:

In 2010 the Model Court Executive Committee identified enhancing the court's response to ASFA's permanency plan of Another Planned Permanent Living Arrangement (APPLA), as a goal. While it was recognized that APPLA is the least preferred permanency plan for a youth, it is also believed that in some limited circumstances it is the most appropriate plan for a youth. In those instances it was determined there is a need to have protocols available to guide courts, DCYF, CASA and other stakeholders so that roles and responsibilities are clearly understood that youth should have an identified primary caring adult and be adequately prepared for adult living before they exit care and the abuse or neglect case closes.

A multidisciplinary subcommittee was established and chaired by a DCYF Field Administrator. The multidisciplinary subcommittee includes representatives from DCYF, the courts, CASA, the

Bar, a foster parent, and former youth in care, as well as the Court Improvement Project Coordinator and consultant.

Throughout 2011 the subcommittee met monthly and bi-monthly and in November the subcommittee recommendations and proposed protocols were reviewed with representatives from the Model Court's Executive Committee, including DCYF's Director and CASA's Executive Director. After some revisions, the protocols were presented to the executive committee again in April of 2012.

To assist the APPLA subcommittee and advance the protocol development work, a Court Improvement Project consultant conducted extensive research on APPLA; national trends related to it and work being done in other states for older youth aging out of care. This information has been used to guide the ongoing work of the APPLA subcommittee and Model Court Executive Committee. The Court Improvement Project consultant was also able to do a site visit to "You Gotta Believe", an agency led by Pat O'Brien in New York City. This information was considered in developing the APPLA protocols. The tentative plan is to provide training in early 2013 prior to implementation of the protocols.

The work of the Model Court has also utilized the resources of the National Council on Juvenile and Family Court Judges for assistance with consultation, strategic planning, evaluation and information sharing.

PERMANENCY PROGRAM

Permanency means that children have a safe and stable family that provides nurturing, concrete supports, and the foundation for healthy life-long development. "Family" may be the biological parents or it may be a birth relative, an adoptive family, a guardian, or for some older youth, an adult or a network of adults who are committed to a supportive, nurturing life-long relationship with the youth. Maintaining, strengthening, and creating life-long connections throughout DCYF involvement is essential to supporting permanency.

The Permanency CPSWs in coordination with the Permanency Program Specialist are responsible for facilitating timely permanency for children in state's care. They meet every other month to discuss program needs in order to move permanency practice forward and to facilitate permanency planning for each child in New Hampshire. This includes planning for implementing statewide permanency initiatives, policy development, practice discussions, and collectively brainstorming ways to overcome challenges.

Juvenile Justice Services has a Permanency Administrator who is responsible for overseeing permanency for youth involved in the Juvenile Justice system. The Permanency Administrator works in collaboration with the Permanency Program Specialist to provide permanency training to staff and support to the field for case consultation regarding permanency. The Permanency Administrator is working with the Bureau of Organizational Learning and Quality Improvement to develop a tracking tool from New Hampshire Bridges, to monitor permanency plans and outcomes with Juvenile Justice cases.

PAR staff (Permanency, Adolescent, Resource workers and their supervisors) from across the state meet quarterly to discuss ways to sustain or improve existing practices. Relationships, networking opportunities, and shared philosophies are derived from participation at the PAR meetings. These meetings have built statewide collaboration. The PAR team members bring back to their district offices the program messages and policy changes that have been developed or agreed upon at the PAR meetings.

Another initiative that continues to make great improvement in permanency practice is the monthly ISO (Individual Service Option) recruitment meetings. These meetings were established with ISO providers to look at children who need recruitment for ISO level families. These meetings give workers the opportunity to provide additional information about the child's likes, interests, and needs to the ISO agencies to facilitate the recruitment for permanent families. These meetings tend to give ISO agencies a more accurate and personalized picture of the child who is in need of a family. In 2012, these meetings expanded to allow the youth to come and present themselves and express their desire for a family. There has been an increased focus on including youth involved in the juvenile justice system in ISO meetings in order to expand recruitment efforts.

Permanency Planning Teams (PPT)

Since 2003, Permanency Planning Teams (PPT) have been established in each district office. Each Permanency Planning Team is comprised of the same core group of staff: the Permanency CPSW, Adolescent CPSW, Resource CPSW, Family Assessment and Inclusive Reunification facilitator, CPSW for the case, the supervisor for the CPSW assigned to the case, and Permanency Unit Supervisor. Other Permanency Planning Team participants, depending on the case, could include district office supervisors and other program specialists as needed. Juvenile Probation and Parole Officers (JPPOs) are focused on permanency planning and attend Permanency Planning Team meetings when they need assistance establishing connections or have the permanency plan of adoption or guardianship for youth that they serve.

Below is a list of the total Permanency Planning Team meetings held over the past seven years. New Hampshire has prioritized the regular review of permanency plans for children who have been removed from their parents care in order to ensure that timely permanency is achieved. The source of this information is New Hampshire Bridges.

| PPT meetings held per calendar year | Total |
|-------------------------------------|-------|
| CY 2006 | 1029 |
| CY 2007 | 1320 |
| CY 2008 | 1388 |
| CY 2009 | 1395 |
| CY 2010 | 1189 |
| CY 2011 | 1892 |
| Grand total | 8213 |

The PPT meeting looks at permanency options for the child and ensures that relatives and other supportive adults are engaged to ensure children have permanent connection and that community

support is maintained. The connections identified are documented on the Permanency Planning Team form to include the frequency of the contact. Concurrent planning and permanency timeframes are also a focus of these meetings.

Permanency Tracking

In 2010, the field began using Bridges to document the Permanency Planning Team meetings. This allows for better tracking and monitoring of Permanency Planning Team meetings and it provides the ability to query the data from the Permanency Planning Team forms in order to assist the field with permanency planning.

A Permanency Planning Team report is distributed to field staff and supervisors on a monthly basis to ensure that all children in placement are reviewed in appropriate timeframes. A Permanency Report has been created to look at permanency planning for children in care. This report tracks children who are legally free to help the field ensure that adoptions are occurring in a timely manner. The report also looks at children who are in residential and ISO foster care placements to keep transition planning to less restrictive placements in mind for these children. Additional emphasis of this report is permanency planning to help the field ensure that the appropriate plan is in place for each child.

Recruitment continues to be a priority and a centralized database has been established via DHHS E-Studio, to help streamline communication on recruitment needs. E-Studio allows DCYF staff to share information with outside ISO agency providers regarding recruitment needs. This password protected resource allows DCYF workers to schedule matching meetings on a central calendar, send email notifications of matching meetings, and have an up-to-date centralized location to share information regarding children from each district office who need recruitment. Each child in need of recruitment has a profile that is attached in a folder for the district office. When they are matched or placed in a family, the profile is placed in the corresponding folder. This allows all offices and child placing agencies to have updated information on the status of the recruitment for that child. It also allows a mechanism to request a family for the child needing recruitment and then to track responses for that request made by each office and child placing agency representative responsible for responding.

Recruitment efforts for children are now tracked in Bridges. This information is internal to DCYF staff only and will show children needing recruitment for permanent families, efforts made for recruitment, last date of recruitment efforts, and will track all placements made from these recruitment efforts. This report helps the field monitor recruitment needs and efforts to ensure that there are ongoing efforts made for every child in need of a permanent family.

Permanency Round Tables (PRT)

As part of the DCYF's continued collaboration with Casey Family Programs, Permanency Round Tables (PRTs) have been implemented to achieve effective permanency for youth in care. Permanency Round Tables bring together DCYF representatives and external stakeholders to do an intensive review of what has happened and what needs to happen to achieve permanency for youth who have had extended lengths of stay in out-of-home care. Child protection staff,

supervisors, representatives from CASA, and other external stakeholders participated in three days of training prior to the initiation of PRT meetings, which included Orientation to the Permanency Round Table process, Permanency Values Training, Youth Engagement Training, and a Permanency Round Table Skill Building Training.

New Hampshire is one of the few states that conducted the Permanency Round Tables through a two-stage process. The first stage was a two-hour internal meeting with the Casey Family Service Consultants to review the case and develop a plan for the second meeting with the youth. The second stage was a youth-driven meeting, including the youth's connections, which lasted up to one and a half hours and focused on permanency planning for the youth.

This Permanency Round Table process provided the opportunity for staff to look at their own professional development through facilitation and case planning opportunities. It is anticipated that the implementation of Permanency Round Tables will shift practice, to stimulate policy change and resource development through the engagement of system partners in support of this exploration of permanency options for each youth presented.

In October and November, DCYF conducted reviews of forty-eight youth cases with the permanency plan of APPLA in order to further plan for their permanency and look at ways to overcome any barriers. Out of the forty-eight youth reviewed at the Permanency Round Tables some of the successful permanency outcomes are described below. These outcomes were based on reports from the district offices as of April 2012.

| PRT PERMANENCY OUTCOMES | Number of Cases |
|-------------------------------------|-----------------|
| Increased/New Community Connections | 2 |
| Increased/New Family Connections | 10 |
| Moved to Foster Home | 8 |
| Plan is Guardianshi | 1 |
| Plan is Adoption | 7 |
| Plan is Reunification | 4 |
| Case Closed/Permanency Achieved | 2 |
| No Change | 18 |

The utilization of Permanency Round Tables in New Hampshire is being expanded to include youth involved with juvenile justice services in the next round of Permanency Round Tables scheduled for July 2012. Juvenile justice service staff and child protection staff who were not previously trained, attended two days of training from May 21-22, 2012 related to the Permanency Round Table process.

New England Youth Permanency Convening

New Hampshire has participated in three New England Youth Permanency Convenings that are two-day conferences with the focus on advancing legal permanence for youth in foster care. The last convening was November 29th and November 30th 2011. The convening brings New England States together to hear about promising practices that facilitate permanency planning for children and allows time for each state team to come together and develop future action plans. The fourth annual Permanency Convening is scheduled for November 27 and November 28, 2012. New Hampshire's action plans are measured using the following criteria:

- An increase in the numbers of youth (under and over age eighteen) who exit foster care with legal permanence;
- A decrease in the entries of youth in foster care;
- A decrease in the numbers of youth who have long-term foster care goals, such as APPLA; and
- A decrease in disparities in permanency outcomes for youth of color.

Recruitment efforts for children are now being tracked in Bridges. This information is internal to DCYF staff and shows children needing recruitment for permanent families, efforts made for recruitment, last date of recruitment efforts, and tracks all placements made from these recruitment efforts. Field staff have been trained on this new documentation and the first draft of this Recruitment Report will be distributed in July 2012. This report will help the field monitor recruitment needs and efforts to ensure that there are ongoing efforts made for every child in need of a permanent family.

Services for Children Under Age 5

New Hampshire assesses the developmental needs and provides services for infants, toddlers and children under age five on an ongoing basis throughout the life of our involvement with a family. Prevention, early identification and intervention are at the forefront when assessing safety and managing future risk of this population. At the onset of a protective investigation DCYF staff work with families and use a solution-based approach to identify the developmental stage the family is at based on the ages of the children. An assessment of the activities and tasks common to families at that stage occurs including discussion with the parents regarding the physical, educational, emotional and mental health needs of the children. Referrals for services are based on the identified needs of the family and the children. Rehabilitative services provided are aimed at increasing parental functioning as it relates to understanding and meeting the needs of the children including: nutritional, behavioral and developmental, as well as maintaining a safe and stable environment. Case planning includes ongoing review of outcomes related to the service provision and impact on the child's development.

In founded cases, children under the age of three are referred to Early Support and Services (ESS) for a developmental assessment. An ESS coordinator is assigned for every family/child when it is determined the child has an identified need or qualifies under identified risk factors for developmental supports. Children over age three are referred by the assigned CPSW to the local

mental health center for mental health/trauma screening and to the school department for early intervention when there is an identified need. In addition infants, toddlers and children under five with significant medical needs may be referred to DHHS Special Medical Services. Special Medical Services (SMS) provides medical and financial services to children with special health care needs (CSHCN). Children with special health care needs are those who have, or are at increased risk for, chronic physical, developmental, behavioral, or emotional conditions, which require health and related services of a type beyond that, required by children generally. SMS helps New Hampshire families with health information and support services, and helps them with specialty health care services for their eligible children. SMS also provides care coordination services, support for child development and neuromotor clinics, nutritional and feeding/swallowing consultation, psychological and physical therapy services.

DCYF is currently involved in a number of activities aimed at enhancing the ability of child protection workers to consistently and effectively assess the developmental needs of young children. These activities are directly related to ongoing case planning and providing targeted services to achieve reunification and permanency. In June 2011 a Memorandum of Understanding was established between DCYF and Head Start/Early Head Start Programs in an effort to assure collaborative case planning and provision of services to young children and their families. DCYF has participated in "Watch Me Grow" activities and this past year every district office was provided an Ages & Stages Questionnaire Kit. DCYF plans to introduce training to staff in 2013 on the use of Ages & Stages questionnaires when conducting initial and ongoing assessments of young children as part of case planning. These tools can be used to screen a child's development in the major domain areas of gross/fine motor skills and communication skills as well as social and emotional well-being. It is anticipated that use of these tools will enhance parental/caregiver capacity to support the normal development of children by providing them with significant information about the child's development and activities they can do with their children. For young children in placement, staff will be encouraged to introduce these tools to foster parents and relative caregivers to support them in meeting the identified needs of young children placed in their home.

DCYF continues to conduct Permanency Planning Team (PPT) meetings on a regular basis regarding all children in placement. These meetings focus on identification of the child's current and future needs, which may include, but are not limited to developmental, social and emotional needs and services needed to meet those needs including early intervention, child care, after school programs, respite, medical, dental and mental health care. Discussions at PPT meetings, in 1:1 supervision and in meeting with foster parents/pre-adoptive parents include assessing parent/child attachment and consistent review of attachment between the caregiver and the children including assessment of the impact of trauma on the short-term and long-term development of the child.

Youth under age five who remain in care longer are children with significant physical and developmental disabilities. These children require very targeted recruitment efforts and DCYF works closely with the child placing agencies to help identify and recruit families that may be willing and able to commit to these children when reunification cannot occur.

As mandated by the Head Start Act, New Hampshire has established an early childhood advisory council referred to as SPARK. SPARK is in the process of developing a comprehensive strategic plan for early childhood policy, procedures, services, coordination and access. SPARK's workforce professional development committee is currently working to identify the skills and competencies staff and providers need to work with this population of young children and families. They will also be making recommendations for New Hampshire's Early Childhood Education quality rating improvement system related to safety and individualizing interventions based on identified needs of infants, toddlers and preschoolers. Review of recommendations related to SPARK activities will include DCYF to assure they address areas specific to achieving timely permanency for children.

DCYF will be tracking the number of children under age of five in foster care by utilizing Chapin Hall Multistate Foster Care Data Archive (FCDA). FCDA is a longitudinal analytical tool that enables the Division to conduct powerful statistical analyses of existing data and monitor outcomes. Using this tool the Division will be able to monitor those children and their outcomes on an ongoing basis. The tool will enable the Division to also track the following demographic information about those children - gender, race and ethnicity.

THE BUREAU OF WELL-BEING

The Bureau of Well-Being provides clinical and practice oversight of programs addressing the following areas:

- Clinical services and mental health support for children involved with DCYF;
- Approvals for all Children In Need of Services (CHINS) cases;
- Development of services support for children involved with DCYF;
- The physical health of children involved with DCYF;
- Services and supports for adolescents; and
- Parent Engagement.

FOSTER CARE HEALTH PROGRAM

Since November of 2009, DCYF has two foster care health nurses that are available to each district office as consultants for any family involved with DCYF, either during the assessment phase or after a case has been opened. Each child receives a comprehensive health and developmental assessment within thirty days following placement. The Foster Care Health Nurses act as healthcare program managers to ensure that every child in relative or foster placement has their medical, behavioral, and dental health needs met. The Foster Care Health Nurses also act as healthcare coordinators for children in care who have complicated health care needs to ensure that their medical needs are being met effectively and to collaborate with community providers to ensure positive health outcomes.

A vital element of this program is the provision of a comprehensive behavioral health assessment for every child's first out-of-home placement into foster or relative care, or upon placement in a general group home. CPSWs and JPPOs are responsible for making the initial referral to the Community Mental Health Center.

Program oversight is critical in providing continuous quality health outcomes for children in outof-home care. In December of 2009, DCYF completed phase one of the Foster Care Health Program oversight report. This report retrieves data from Bridges to help track the basic medical and dental care of all children in an out-of-home placement. The critical data elements in this phase one report include:

- Annual Exams;
- Dental Exams;
- Initial Behavioral Health/Developmental Assessments; and
- Medical Authorizations are up to date.

All elements on this report are tracked for exams/assessments that are upcoming, overdue or blank (information not entered into Bridges). This assists the Nurse Consultants and the District Office Supervisors in tracking routine medical and dental needs and that medical records are being kept up to date in Bridges.

Phase two of this report is currently being developed. This phase involves obtaining Medicaid data for all children in out-of-home care on a monthly basis as a method to track all medical care and prescription medication that is being administered. Initial conversations with data analysts with the Medicaid offices have occurred. Continued work on phase two began in the fall of 2011. This work continues to be developed as part of the plan for oversight of psychotropic medications. The report being developed will utilize Medicaid billing data.

The newly formed Foster Care Health Advisory Committee will be able to use these reports to assist in practice and resource development.

CHILDREN IN NEED OF SERVICES (CHINS)

The CHINS program is designed to serve children with a mental health diagnosis and who are acting in a way that is considered dangerous to either self or others. The children served through a CHINS petition must have consent of the department before a petition is filed in court. The Well-Being Bureau Administrator reviews and approves all CHINS referrals and provides the approval letters to be attached to the CHINS petition.

In addition to the approvals, a CHINS monitoring report was developed to track the number of CHINS that were closed due to the change in statute, as well as track the number of new children and youth being served as new CHINS.

PARENT PARTNER PROGRAM

DCYF/DJJS Practice Model work and other initiatives enabled the division to utilize former parents as consultants. This work paved the way to create a new program within the Bureau of Well-Being.

The Parent Partner Program is currently being developed. This program will help to complement the Permanency and Adolescent program work by bringing focus to Parents as Partners and to uphold the division's beliefs and principles that:

- All families have strengths
- All children/youth belong with their family
- Everyone deserves to be treated with respect; and
- Families are best served when they are actively engaged; their voices are heard, valued and considered with regard to all decisions.

The Parent Partner Program will create systematic ways to develop a network of parent leaders ready to partner with the divisions in various roles and capacities. This program will promote parent voice, active participation, and inclusion in the work of the division. Parents will be identified, engaged, trained, and empowered to be a resource to other parents as supports, coaches, mentors, advocates, and role models. They will also take leadership roles within the division being a "parent voice" to impact positively, practices and systems changes.

This is an intentional new way of relating with our parents that promotes them as change agents and leaders.

Initiatives that have developed in the past year that are now an integral part of this program development include:

Better Together with Birth Parents

- Six regional workshops planned for 2012
- Anticipated forty-eight parents will attend the workshop (eight for each regional session) and learn tools to effectively partner with the division
- Anticipated forty-eight staff will attend the workshop (eight for each regional session), listen to parents "voice" as they "strategically share their stories" in the context of building tools for partnership
- Each district office will develop a team after each Better Together workshop that will begin to explore how parent leaders can be successfully utilized in that district office.
- Incorporated Better Together workshops into new worker core training in 2012.

Father Engagement Initiative

- New Hampshire Father Engagement Action Team established
- Includes three parents on the team; two birth fathers and one foster father

- Team will meet monthly to create and test small practice changes, utilizing BSC methodology, aimed at improving the division's capacity to identify, locate and engage fathers of children in the system
- Successful strategies will be recommended to the division's leadership for system wide spread

Birth Parent/ Foster Parent Partnership

- Initiative in partnership with the Foster Care Program
- State team includes three birth parents (two mothers and one father) and three foster parents
- Goal: learn effective strategies to improve relationship building and co-parenting between birth parents and foster parents
- Aim: develop a "mentoring component" to our foster care program creating an effective tools for bridge building and developing the foster parents capacity to serve as mentors and role models coaching parents in improving their parenting
- Started the development of the mentoring program.
- Utilizing a parent partner ally to provide support to biological parents at the first Family Assessment and Inclusive Reunification (FAIR) meeting in a district office.

FAMILY ASSESSMENT AND INCLUSIVE REUNIFICATION (FAIR) PROGRAM

DCYF maintains a contract for the provision of Administrative Case Reviews (ACR) for children and youth who are in the care and custody of DCYF and are placed in out-of-home care for six months or more. Qualified child welfare professionals who are not responsible for direct case management conduct the reviews. As such, the reviewers serve as an objective, yet highly qualified third party. The role of the ACR is to ensure case planning activities achieve the best possible outcomes for children and families.

The ACR Program was initially designed to ensure that DCYF and DJJS cases were in conformity with the federal child welfare requirements. As described in last year's APSR, DCYF and DJJS modified the ACR process to include changing the timing – instead of the first ACR occurring after the child has been in out-of-home care for six months, the first ACR occurs within ten days, the next within four months and then every six months thereafter. In addition to the change in timeframes, the content of the ACR is being modified to promote a process through which the family and their identified supports are engaged in the initiation of the case planning process particularly surrounding placement including the identification of relatives, parenting opportunities and other issues relating to attaining the goal of reunification at the start of the case. These meetings are held at the location that makes sense and is most supportive of the family and children. This process, known as Family Assessment and Inclusive Reunification (FAIR), began as a pilot in the Portsmouth District Office in January 2010 and expanded to the Rochester District Office in April 2010 with a long-term goal of its implementation in all district offices by the end of 2010.

In January 2011, FAIR was rolled out statewide as part of a new contract. Given the timeliness of implementing FAIR and the <u>family engagement</u> components of the program, it has served as a model for current and future family engagement strategies being developed by the division through the Practice Model.

As indicated in last year's APSR, given the FAIR program just began statewide in January 2011, there was no data at that time to indicate preliminary successes and areas needing additional focus. The first FAIR Annual Report was submitted to DCYF in August 2011. The information below comes directly from the FAIR Annual Report. In addition to presenting information on family engagement and attendance, several recommendations were made to improve upon the overall FAIR process. Some of those recommendations are listed below.

"In regards to participants' feedback about the FAIR program and process there has been minimal variance in the reported percentage of satisfaction among the domains. Below is a chart to illustrate the level of report satisfaction."

| | | | Quarter 2: | | |
|-------------------|-------------------|-----|---------------|-------------------|-----|
| Quarter 1: Jan to | | | April to June | | |
| March 2011 | Domain | | 2011 | Domain | |
| | Family | | | Family | |
| | Engagement | 95% | | Engagement | 96% |
| | Meeting Logistics | 84% | | Meeting Logistics | 83% |
| | Meeting | | | Meeting | |
| | Outcomes | 95% | | Outcomes | 95% |

"Some of the similar areas of concerns that have been reported throughout the first six months of the program have been concerns of the lack of parents and youth attending the FAIR meetings. In addition there is concern of not all valuable team members being able to attend the FAIR meeting as well. Another common area of concern has been participants reporting that they feel that they are not prepared for the FAIR meeting and therefore are unsure of the purpose of the meeting."

Recommendations:

- "In order to continue to improve upon the FAIR program, below is a list of recommendations in order to ensure the ongoing satisfaction of participants about the program.
- FAIR Facilitators will call the parents (biological, foster, adoptive) 24-48 hours prior to the FAIR meeting and provide a detailed message of the meeting time, location, purpose and importance of bringing their identified supports to the meeting. The FAIR Facilitator will also include all work phone numbers in that message to promote their availability to answer any questions the parents may have;
- FAIR Facilitator and CPSW/JPPO will work together to encourage families and youths, of all ages, to participant in all FAIR Meetings;

- FAIR Facilitators will provide and create an environment conducive to children of all ages being present at FAIR Meetings;
- FAIR Program Supervisor will continue to schedule and maintain ongoing meetings with supervisors in each district office to maintain ongoing communication and address any programmatic concerns;
- State Directors continue to promote open communication among their supervisors and FAIR Staff to ensure notification of all removals so that FAIR Meetings are held within the identified timeframe;
- Adaptation to the list of participants on the survey to include foster parent to be able to demonstrate a more accurate number of the amount of foster parents participating in the FAIR process;
- Enhance efforts to work along with residential facilities in order to incorporate the treatment team meeting and FAIR Meeting in a more streamlined manner, if applicable; and
- Ongoing community meetings with CASA, residential facilities, and other community collaterals are important continue to educate regarding the purpose of *the FAIR program* and ways to enhance collateral relationships."

"In conclusion during the first six months of implementation, the FAIR program has made a positive transition from the administrative case review process to the process of assessing and establishing the best permanency plan for a youth and family. Through implementing the recommendations listed above, the program looks forward to an ongoing increase of parents and youth being involved."

ADOLESCENT PROGRAM CHAFEE (CFCIP) AND ETV PROGRAM INFORMATION

The Adolescent Program is overseen and administered by the New Hampshire Division for Children, Youth and Families (DCYF) Adolescent Program Specialist. DCYF is committed to best practice in meeting the needs of youth and will cooperate fully in any and all national evaluations of the effects of the programs in achieving the purposes of CFCIP.

DCYF is a state administered agency and access to CFCIP and ETV funds is universally available across the state.

The Adolescent Program ensures that current and former DCYF youth obtain the preparation; resources and positive youth development they need to establish connections with caring adults and become healthy, self sufficient and successful adults. Adolescent Workers with specialized training in adult living preparation, positive youth development and teen services are located in each district office. They provide case management for youth in out-of-home placement, consultation to other child protection staff working with this population and oversee the dissemination of CFCIP and ETV funds to qualified youth. In addition, DCYF offers services to young adults as they leave out-of home placement, including assistance with post-secondary expenses, housing expenses, and other self-sufficiency needs.

There are five main components of the Adolescent Program:

- 1. The Adult Living Preparation Process;
- 2. New Hampshire TRAILS;
- 3. Youth Advisory Board;
- 4. Teen Conference; and,
- 5. Aftercare Services.

While not a part of the Adolescent Program, the Permanency Planning Team (PPT) is the central way in which Adolescent Workers meet the purposes of the CFCIP and thus is included below.

Permanency Planning Teams

(PPT) teams meet twice a month in each district office to review cases and ensure that all children and youth achieve permanency prior to exiting the DCYF system. In cases where the plan is Another Planned Permanent Living Arrangement (APPLA), particular attention is focused on both the youth's adult living plan and their network of connections. Emphasis is placed on the youth's positive youth development opportunities such as being active in their school and/or community to develop as many connections as possible. Workers are required to work on locating and engaging permanent connections for all their APPLA youth. The adolescent worker in each office is an active member of the PPT team. They utilize their specialized knowledge of adolescent development, needs and resources to assist CPSWs during PPT meetings for teenagers.

Adult Living Preparation Process (ALPP)

All youth in out-of-home placement through DCYF between the ages of fourteen to twenty-one are to participate in the Adult Living Preparation process described below. This includes individuals "likely to remain in foster care" until age eighteen.

While the goal for every child and youth involved with DCYF is permanency, adult living preparation is equally important, especially for those youth in DCYF care who will not be reunified with their parents, adopted or in relative guardianship prior to case closure. The DCYF Adult Living Preparation Process (ALPP) provides assistance to older youth in care by helping them transition to self-sufficiency. The process starts with youth at the age of fourteen who are in DCYF guardianship or custody. At the time of this report the Adolescent Program was also serving DJJS (Division for Juvenile Justice Services now has merged with DCYF) youth age sixteen and older who are in out-of home placement and provide monetary support to those who are or were in foster care and Title IV-E eligible during their current DJJS case. (Due to the merger the eligibility for youth involved in the juvenile justice system will be modified). ALPP plans are to be updated on a yearly basis.

Participating in the Adult Living Preparation Process along with the youth is their caregiver, their DCYF or DJJS worker and other significant adults in their life.

The first phase of the ALPP begins with the Needs Assessment. The youth is interviewed about their strengths, challenges, interests, supports, and future goals. Following the Needs Assessment is the Skills Assessment, which identifies the youth's skills and abilities in the following domains: Behavior and Social Skills, Money Management, Home and Food Management, Personal Care, Health and Safety, Education and Employment, Transportation, Law, Community Resources and Recreation.

The third step in the process is the Adult Living Plan. For each domain area indicated by the Skills Assessment, the Adult Living Plan identifies the specific transition plan for the youth. In addition, whatever action steps need to be taken by the primary caregiver, the DCYF CPSW or the youth as part of the youth's preparation process are indicated along with time frames for completion. For example, if the youth is lacking connections outside of the professionals in the case, the Adult Living Plan could recommend that the foster parent connect them to a community youth group within 30 days. Also determined at this time is whether the youth needs any financial assistance in order to achieve their adult living plan goals.

During the Adult Living Preparation Process youth are provided with information on housing, employment, education and other resources needed for them to achieve their goals.

The Needs Assessment, Skills Assessment and Adult Living Plan are completed within 60 days of the youth's eligibility. The Skills Assessment is redone every six months to track the youth's progress. The Adult Living Plan is updated each year to reflect progress and changes as they occur.

The last component in the ALPP is the Aftercare Plan that is done when the youth turns seventeen years old. The Aftercare Plan is an opportunity for the youth to develop an anticipated budget based on where they plan to live after exiting care. Also included in the Aftercare Plan are any and all supports and services the youth has and will need after exiting care.

For youth who have a special education coding, the Adolescent Worker sends a letter to the sending school district. The letter invites the school to join with them to develop the federally mandated "Transition Plan" outlined by Public Law 101-476. The law mandates that students with disabilities have a "Transition Plan" at age sixteen.

DCYF Youth who are seventeen and three quarters years of age have a "90 Day Youth Transition Meeting," The meeting identifies and plans for the transition needs of youth and occurs ninety days prior to the youth's eighteenth birthday and in cases of extended jurisdiction, again ninety days prior to the youth's final exit from state care.

The youth is provided the opportunity to have input regarding the "90 Day Youth Transition Meeting" including individuals they would like to invite as well as the time date, and location of the meeting. During the meeting the CPSW assists the youth with the creation of a "90 Day Youth Transition Plan." This document details the specific assistance and support available to the youth during and after their transition. Specific options for housing, health insurance, and education, local opportunities for mentors and continuing support services, work force supports

and employment services are indicated and are as detailed as the youth may elect. The plan is updated prior to the youth's exit from care if circumstances change.

The culmination of the "90 Day Youth Transition Meeting" process is for each youth to be provided with a packet containing all of their educational and medical information, along with contact information for the identified individuals in their post care support network and their mental and dental health providers.

The DCYF Adolescent Workers attend the meetings whenever possible. They are responsible for ensuring that the meetings occur for all the youth in their district office.

New Hampshire TRAILS (Teen Responsibility and Independent Living Skills)

Once the youth has reviewed and signed their Adult Living Plan, their primary caregiver may start the "New Hampshire TRAILS" life skills curriculum. New Hampshire TRAILS was created in 2001/2002 by a collaboration that included Granite State College and a group of youth workers and youth from across New Hampshire. It empowers caregivers who receive training on its use by Granite State College, to prepare youth for the transition out of state care and into adulthood. New Hampshire Trails is divided into three sections:

- 1. Personal and Social Growth;
- 2. Education and,
- 3. Career Development and Daily Living Skills.

New Hampshire Trails is an effective way for youth to learn the skills they need as identified by their Skills Assessment and indicated in their Adult Living Plan.

Youth Advisory Board

The DCYF Youth Advisory Board, known as New Hampshire Teen Voices, is composed of young adults currently and previously in out-of-home care. The board's mission is "making a difference for youth in care by voicing opinions for positive change". Since January of 2011, the New Hampshire Teen Voices has had a regional board structure. The five regional boards meet monthly to work on a variety of projects of interest to youth in care. On a quarterly basis all the groups meet together to review progress and plan for the future. This structure has increased the level of youth participation as well as bolstered the community connection. As of the writing of this report there are over forty active members of New Hampshire Teen Voices.

DCYF solicits feedback from New Hampshire Teen Voices for practice changes along with policy and program development. The board also provides leadership experience to youth who participate in panel discussions and trainings provided to peers, agency staff, placement providers, and community professionals. The board publishes a newsletter and conducts an annual teen conference for DCYF youth. The board's accomplishments over the past year include the creation of a Bill of Rights for youth in care, assisting in the creation of a youth voice form for use in the Permanency Roundtables (PRT), an increase in the leadership of the DCYF annual teen conference and participation in numerous trainings and presentations. The board has

also been instrumental in helping to create legislative change to better the lives of youth in care. A previous example of this has been their role in passing the Tuition Waiver Legislation. New Hampshire Teen Voices has also been actively involved in the New England Collaborative, an advocacy group made up of youth leaders from across the region.

Annual Teen Conference

Each year the Adolescent Program and New Hampshire Teen Voices host a conference for teens in out-of-home placement. Approximately 130 youth and 100 staff participate in the yearly event that takes place on a college campus. The youth determine the workshops through a survey and topics usually include the safe use of technology, finding an apartment, managing your money, healthy relationships, renting an apartment, self advocacy, getting a two-year degree, getting a job, and the college admissions and application process. Most recently all youth attendees have been participating in a town hall style meeting with the DCYF Director. This past year members of the New Hampshire Teen Voices DCYF Youth Advisory Board assisted in the actual running of the conference as youth leaders of the five geographic regions that attend the event.

DCYF Aftercare Services

A voluntary program that provides continued case management, future planning, and limited financial assistance to former youth in care pursuing educational, employment, housing, and other goals. Young adults receiving DCYF Aftercare Services may receive Chafee and/or ETV funds depending on their eligibility status.

Eligibility for ETV funds: Young adults between the ages of 18-21* who:

- Exited Division for Children, Youth and Families (DCYF) placement for abuse or neglect on or after their 18th birthday;
- After attaining 16 years of age left DCYF placement for guardianship or adoption;
 or
- Exited Division for Juvenile Justice (DJJS) placement on or after their 18th birthday (17 for delinquents) and were Title IV-E eligible and placed in foster, relative, shelter or residential care at some point during their last DJJS case.

Eligibility for Chafee funds: Young adults in the **bold** type above.

* Young adults enrolled in college or a career training school and making satisfactory academic progress at the time of their 21st birthday may continue to receive Education and Training Voucher funds until they turn 23 years of age.

Eligible youth are informed about Aftercare Services by their caseworker during the Adult Living Preparation Process and again during their 90-Day Youth Transition Meeting. They can sign up for Aftercare Services after the closure of their DCYF case through their CPSW or through the DCYF Adolescent Worker from their current or former DCYF office. A special

effort is made to inform adopted youth about Aftercare Services. When an adoptive family is identified they receive a packet of information about adoption including an explanation about Aftercare Services and other pertinent youth resource information.

Participating young adults are assigned a DCYF CPSW who begins the process by meeting with the youth and talking about their housing, education and employment related needs and goals. The next step is the development of a self-sufficiency plan that indicates what the young adult is going to do to pursue their goals and the assistance they will receive from DCYF. Young adults applying for or attending college or a vocational training program are also asked to complete a New Hampshire DCYF Aftercare Services College and Career Training School Assistance Application. A college preparation packet containing information about financial aid, scholarships, student loans, the tuition waiver and ETV program is provided to all DCYF high school seniors interested in attending college.

The DCYF CPSW helps the young adult set goals, provides ongoing support and encouragement through regular contact, and provides guidance, referrals and case management services as needed. Financial assistance is based on the young adult's needs and goals and may include help with housing, tuition, meals, books, clothes, health insurance, counseling, car purchases, and related costs.

During an aftercare case, it is expected that the young adult maintain regular contact with their CPSW, update them on progress and provide receipts for any and all financial assistance provided.

Extended Care Services

Some youth who exit foster care are overwhelmed with the challenges of transitioning to adulthood and have not established the permanent connections to adults they need for ongoing support. For these individuals the limited assistance they can receive through DCYF Aftercare Services is not sufficient and they need more intensive assistance sometimes including temporary placement. To better support youth in that predicament DCYF created Extended Care Services. Extended Care Services provides support to former youth in care until the age of twenty-one and sometimes beyond by partnering with them to stabilize their lives and by searching with them for a permanent caring adult. In addition to temporary placement, youth in Extended Care Services receive case management, referrals to other agencies, assistance in finding a permanent caring adult and limited mental health or other appropriate therapeutic services. Once they are in a more stable situation these youth will have the option of being transitioned from Extended Care to Aftercare Services. Six youth were assisted through Extended Care Services this past year. Outcomes achieved included graduating from high school, car repairs to maintain employment and avoiding homelessness.

National Youth in Transition Database (NYTD)

The New Hampshire DCYF created a system for recording and reporting the required NYTD data. The "Monthly NYTD Checklist" is used to collect information regarding independent living services provided to DCYF youth age fourteen and older and DJJS youth age sixteen or

older residing in foster, shelter, relative, residential or institutional care. The information is used to compile statewide data on independent living services as defined in the NYTD federal requirements. The "Monthly NYTD Checklist" is completed monthly by whoever provides the service to the youth including staff, foster parents and residential staff. The information from the checklist is entered into the state SACWIS system known as New Hampshire Bridges.

The "National Youth in Transition Database Outcome Survey" is used to collect outcomes information for youth who are part of the NYTD "Baseline and Follow-up Populations" as well as other DCYF youth who take the survey. The National Youth in Transition Database Outcome Survey (Form 2581) is completed by the youth during the forty-five-day period after their 17th, 19th and 21st birthdays. DCYF staff administers the survey in person or over the phone to youth in the baseline population. As an incentive participating youth were provided with a \$25 gift card. The process was successful in ensuring that New Hampshire DCYF met all of the federal NYTD requirements.

This process will be repeated when the youth turn 19 and 21. To aid in this effort staff receive automatically generated emails reminding them to keep in touch with youth in the follow-up population. Maintaining ongoing contact with NYTD youth is required by DCYF policy. In fact the expectation is that there is some type of monthly contact either initiated by the youth or the staff person. As an added incentive youth in the follow-up population who take the survey in October of 2012 or April of 2013, depending on their birthday, will receive a \$25.00 gift card and be eligible to win a laptop. Follow-up youth will be able to access the survey via a website and Facebook page. There they will find a video of a former youth in care exhorting them to complete the NYTD survey.

Youth Action Pool

The Youth Action Pool is a subcommittee of the New Hampshire Teen Voices, DCYF's Youth Advisory Board. Participating in YAP are current and former youth in care that are motivated, responsible, and committed to positively influencing, changing or improving DCYF/DJJS current adolescent practice. Sixteen members of YAP were trained in Strategic Sharing this past year. The purpose of the YAP is for youth to be actively and directly involved in DCYF practice. Opportunities will include being trainers, panelists, committee members, practice consultants, facilitators or youth mentors. The youth we have are a valuable asset and we can benefit greatly from their knowledge and first hand experience. This past year YAP members have participated in a variety of workshops at DCYF trainings and conferences.

APPLA

Once again there were significant efforts made aimed at improving the permanency plan of APPLA this past year including the continuation of the APPLA pilot, the <u>Model Court</u>, APPLA reviews, and the Permanency Roundtables.

The DCYF has begun restructuring the role of the Adolescent Worker to focus more attention on APPLA youth especially those without a permanent connection. There are currently two APPLA

workers, one focused on the Seacoast and Rochester District Offices and the other on the Berlin, Conway and Littleton District Offices. In these areas the APPLA worker does not carry an abuse/neglect caseload but instead is the monitor of all APPLA youth in these offices to ensure that each youth has a solid transition plan, is being prepared for adulthood and most importantly has an identified permanent connection. These positions have increased permanency for APPLA youth along with bolstering their adult living preparation abilities. The intention is to eventually shift the responsibilities of all the Adolescent Workers to a primary focus on APPLA youth.

Merrimack County New Hampshire is the site of the Model Court, an initiative supported by New Hampshire Basic Court Improvement Project (CIP). A major focus of the Model Court this past year has been on improving the quality of the permanency goal of APPLA. Representatives from DCYF, CASA (Court Appointed Special Advocates) along with a former youth in care and a foster parent participated in this effort to establish minimum acceptable standards for APPLA. These include criteria for age, the identification of a permanent caring adult and a focus on adult living preparation and education. Once finalized, these standards will become protocols that will be adhered to in the two courts of Merrimack County.

A separate APPLA review using item #10 of the Child and Family Services Review tool has been added to the DCYF Case Practice Reviews. As of the writing of this report a total of seventy-six cases with a plan of APPLA have been reviewed. Additional cases will be reviewed in 2012.

In October of 2011 New Hampshire DCYF, in collaboration with Casey Family Programs (CFP) conducted Permanency Roundtables or PRTs. "The purpose of PRTs is to develop a plan to expedite permanency for children in care as well as to identify systemic barriers to permanency. The PRT also stimulates thinking and learning about pathways to permanency for children. The actual PRT is a case review methodology, led by the internal agency and supported by Casey Family Programs (CFP), which brings people together to focus on permanency planning for youth in care" (Description of PRT process by Casey Family Programs).

Forty-eight youth all with a plan of APPLA were been selected to be part of the PRT process. One month after the initial PRT meeting there was a special follow-up meeting with the youth called the PRT II. The meeting addressed ideas generated at the PRT to enhance the youth's permanency. The PRT resulted in legal permanency for many participants and the vast majority of youth saw in increase in connections or placement in a less restrictive setting.

New additions for SFY 2012:

New youth related initiatives started in SFY 12 include Normalcy Survey, New Hampshire Youth in Care Bill of Rights, APPLA agreement, APPLA case practice tool, Casey Life Skills Assessment and Facebook outreach efforts.

Normalcy Survey

Normalcy is defined as being within certain limits that define the range of normal functioning (the freedictionary.com). For youth in care this means being able to do things that other teens do

like spending time with friends and family, using a cell phone and/or social networking sites, dating, belonging to school or community organizations, etc. Based on the input from the practice model youth consultant and members of the New Hampshire Teen Voices, access to these experiences for youth in some residential facilities can be extremely limited or even non-existent.

A survey was completed to measure the opportunities that youth in residential care ages fourteen to twenty-one have for "normal" and developmentally appropriate activities and to measure the opportunities they have for participation in their care. Key stakeholders including current and former youth in care, residential facilities and agency staff have reviewed the survey and provided feedback. Members of the New England Youth Coalition (NEYC) have also provided their feedback. The completed survey was provided to several other New England states through the NEYC.

Beginning in August 2011 until April of 2012, 158 youth between the ages of 14-21 and in residential care completed a "Normalcy" survey. Participation included youth involved with child protection and juvenile justice and represented over 60% of youth in residential care at the time the survey was administered. A DCYF staff person working with a former youth in care administered the surveys to youth in person. This helped to increase participation as well as provided the youth with the opportunity to ask questions. As of this writing the data from the survey is being analyzed and a full presentation is planned for the Frameworks for Collaboration meeting in June. The presentation will also include recommendations for best practice in "Normalcy" going forward.

New Hampshire Youth Bill of Rights

The New Hampshire Teen Voices in collaboration with the DCYF Adolescent Program Specialist created a fifty-five item Bill of Rights for youth in care of the New Hampshire DCYF. Similar documents from other states were reviewed as part of the creation process. If adopted, New Hampshire would be one of the first states in the country to have a normalcy section in their bill of rights. The document is in the process of being reviewed by the DCYF administration and is expected to debut at the upcoming DCYF Teen Conference in August.

APPLA

In an ongoing effort to improve practice for youth with a plan of APPLA to ensure better outcomes DCYF initiated the use of two new tools, the APPLA agreement and the APPLA case practice tool.

The purpose of the APPLA agreement known as the "Planned Permanent Living Agreement," defines the planned permanent living arrangement between the youth and the foster or relative caregiver. It is not a substitute for legal permanency but another step towards solidifying the youth's current and future level of support. DCYF will continue to pursue more permanent options for the youth including reunification, adoption or guardianship.

The caregiver can select their level of commitment from providing a home and family for the youth until he/she is discharged from out of home placement all the way up to declaring their desire to adopt the youth as an adult. The FosterClub Permanency Pact is used to quantify the caregiver's commitment to the youth as needed. The two DCYF APPLA workers are currently testing the "Planned Permanent Living Agreement," in their regions. Feedback from the testing will be used to create an official policy for the document going forward.

DCYF underwent the CFSR in August of 2010 and #10 APPLA was identified as an area needing improvement. The aforementioned APPLA reviews were created as part of DCYF's Practice Improvement Plan (PIP). As a result of the APPLA reviews best practice themes for concerted efforts in adult living preparation and permanency for APPLA youth began to emerge. A one-page tool was created to highlight what constitutes concerted efforts in these areas that make up item #10. The tool was presented to the DCYF Child Protection staff and supervisors were directed to use it with their staff in supervision to ensure best practice for APPLA cases. The tool will also begin to be used with select juvenile justice cases.

Casey Lifeskills Assessment

In March, Casey Family Programs launched the revised Casey Life Skills assessment (CLS) formerly called the Ansell Casey Life Skills Assessment. The New Hampshire DCYF has been in ongoing communication with the National Resource Center for Youth Development about integrating the assessment into our Adult Living Preparation process. This has included a conversation about onsite training in the fall of this year.

Facebook

The New Hampshire Teen Voices DCYF Youth Advisory Board now has a group on Facebook. This allows us both youth members and adult supporters to communicate more easily about the work of the board, links other youth with New Hampshire Teen Voices and links all group members with the resources, support and opportunities available through the DCYF Adolescent Program.

A Facebook page is currently being developed. It will be a great way to regularly inform a large number of youth and young adults, along with foster parents, residential facilities and other interested stakeholders about the resources, opportunities and support available through the DCYF Adolescent Program. The page will also help us to maintain an ongoing connection to youth in the National Youth in Transition Database (NYTD) follow-up population.

CFCIP & ETV Goals and Objectives

The following CFCIP & ETV Goals and Objectives were to be accomplished during FFY 12 (Items that were to be completed since FFY 10 when the goals and objectives were established are also included):

Goal A Help youth to transition to self sufficiency

Objective 1. In collaboration with New Hampshire Teen Voices advisory board the current adult living preparation process and related policies will be reviewed and updated as necessary. **(Year 1)**

Action: Since this objective was created two major developments have occurred that have impacted it's completion; 1) Casey Family Programs pushed back the date that their revised life skills assessment was ready for use until March of 2012, 2) The merging of the Division for Juvenile Justice Services (DJJS) with DCYF to become one agency. As a result the revamp of the adult living preparation process will begin in the summer of 2012.

Objective 4. Update the New Hampshire Teen Responsibility and Independent Living Skills (TRAILS) to include a pre and post-test and the most current information and resources. (**Year 2**)

Action: The New Hampshire DCYF will be modifying New Hampshire Trails to incorporate all of the areas covered in the new Casey Life Skills assessment. The CLS will then serve as a pre and post-test.

Objective 5. Integrate the Adult Living Preparation process into staff trainings on caseworker monthly visits, case planning and writing court reports. (Year 2)

Action: This has been addressed through presentations to the permanency, adolescent and resource workers, the ongoing APPLA case reviews and through the use of the APPLA case practice tool.

Objective 6. Provide exiting youth with a binder containing their health, educational, personal identification, and personal information of interest at their 90-Day Youth Transition meeting. (**Year 1**)

Action: Completed.

Objective 7. Investigate having the binder mentioned in objective 6 created when a youth first goes into placement and having it follow that youth until they leave the system. **(Year 2)**

Action: Having the "90 Day Youth Transitional Meeting" at age 17 for DCYF Child Protection youth is being explored. This would result in youth getting the binder earlier. Health and education information is in every youth's case file but their personal information is not. The Adolescent Program is going to consult with the New Hampshire Teen Voices regarding the need to for a binder for them to have that has their personal information.

Objective 9. Provide youth with a current list of post care housing options available in their area at the "90 Day Youth Transitional Meeting." (**Year 1**)

Action: Completed. A list of current foster homes willing to provide housing to homeless youth has been created and is in use by staff. Caseworkers work with youth on an individual basis to explore other housing options in their home community.

Goal B Help youth receive the education, training and services necessary to obtain employment

Objective 1. Expand the utilization of employment skills training programs or job fairs through the State and Local Youth Vision teams. **(Year 3)**

Action: This has been completed. The Seacoast, Manchester, Keene, Littleton and Strafford County all conducted a skills training program or job fair this past year.

Objective 2. Increase the familiarity of youth in care with the employment resources and assistance available in the New Hampshire Works by having each State and Local Youth Vision teams sponsor an open house for youth, staff and providers. (Year 2)

Action: Partially completed. The Manchester District Office has had three open houses at their New Hampshire Works office. Several other Local Youth Vision Teams offices are considering doing so.

Objective 3. Expand the utilization of the Business Engagement model through the state and local youth vision teams. (**Year 3**)

Action: Completed. For more detailed information on Business Engagement activities please see the section below under Youth Vision.

Objective 4. Require that all youth in care have a career assessment and receive the assistance needed to explore identified career interests.

(Year 2)

Action: Partially completed. The APPLA worker in the Seacoast and North Country regions have been asked to ensure that all youth in the offices that they cover have a solid idea for a career path and if not that they have a completed career assessment. As the APPLA worker role expands to other parts of the state so will this expectation.

Goal C Provide personal and emotional support to youth aging out of foster care through mentors and the promotion of interactions with dedicated adults.

Objective 1. Conduct quarterly meetings for APPLA youth beginning at age 16 and increasing to monthly at age 17 utilizing the FosterClub Permanency Pact list of suggested supports to solidify the current and post care role of their connections. (Year 2)

Action: Partially Completed. The DCYF district offices have been using the FosterClub Permanency Pact to address the needs of their APPLA youth without an identified permanent connection. The aforementioned "Planned Permanent Living Arrangement" form that is currently being tested in five offices also solidifies the current and post care roles of a youth's connections.

Objective 3. Expand program that connects former youth in care with current youth in care for the purposes of mentoring and adult living skills instruction.

(Year 1)

Action: This program has now become a focus of the newly created Youth Action Pool.

- Goal D Provide financial, housing, counseling, employment, education and other appropriate support and services to former foster care recipients between 18 and 21 years of age to complement their own efforts to achieve self-sufficiency and to assure that program participants recognize and accept their personal responsibility for preparing for and making the transition into adulthood.
 - **Objective 1.** Continue to ensure that all eligible youth are informed about DCYF Aftercare Services prior to exiting care. (**Ongoing**)
 - **Objective 2.** Continue to provide DCYF Aftercare Services to all participating youth. (**Ongoing**)
 - Objective 3. Utilize any and all additional NYTD search and connection tools including website, social networking sites, newsletter, adult living training opportunities to connect youth in need with DCYF Aftercare Services. (Year 1)
 - **Action:** Completed. Information including eligibility and contact persons is on the DCYF Adolescent Program website. This information is also included in the Young Adult Resource guide that goes to every youth who leaves care on or after their 18th birthday.

The New Hampshire Teen Voices Facebook group links all members with the resources, support and opportunities available through the DCYF Adolescent Program. A second Facebook component is being developed which will be a page and will be a way to regularly inform a larger number of youth and young adults, along with foster parents, residential facilities and other interested stakeholders about the resources, support and opportunities offered by the Adolescent Program.

- Goal E Make available vouchers for education and training, including postsecondary education, to youth who have aged out of foster care.
 - Objective 1. DCYF will continue to ensure that all eligible youth are informed about DCYF Aftercare Services (ETV vouchers is a part of Aftercare Services) prior to exiting care and will provide them to participating youth. (Ongoing)
 - Objective 2. DCYF will continue to ensure that all eligible youth are informed about the Tuition Waiver for Foster Children Program prior to exiting care. (Ongoing)

- Goal G Child protection system stakeholders including youth in care, care providers and court appointed special advocates should understand the assistance available through the DCYF Adolescent Program.
 - **Objective 1.** Collaborate with the DCYF Youth Advisory Board to create a way to provide information to youth entering foster care about the DCYF system and the resources and opportunities available to them through the DCYF Adolescent Program (**Year 2**).
 - Action: Partially completed. Previously the DCYF Adolescent Program considered using Foster Care 411, an informative handbook that describes the foster care experience for youth entering care for the first time, for this purpose. However this was tested among several youth and the feedback from the youth was not positive therefore the Adolescent Program is not going forward with this approach. Instead these resources have been loaded onto the Facebook page with youth can utilize. In addition the plan is that when the youth receive their Bill of Rights to sign they will be given a list of resource information. The DCYF Adolescent Program will continue to work with the New Hampshire Teen Voices to develop resource materials for youth just entering care.
 - Objective 3. Adolescent Workers will attend local foster parent association meetings and the Adolescent Program specialist will attend the statewide foster parent association on a biannual basis to update foster parents on the support, resources and opportunities available through the DCYF Adolescent Program. (Ongoing)
- Goal H The experience, skills and abilities of former youth will be utilized to positively impact both current youth in care and DCYF practice with adolescents.
 - **Objective 2.** Provide DCYF Youth Advisory Board members with leadership and youth/adult partnership training through the National Resource Center on Adolescent Development.
 - Action: The youth and adult partners who facilitate New Hampshire Teen Voices felt that this assistance was not needed at this time. The Adolescent Program will continue to explore the need and benefits of this training. (Year 3).
- Goal I DCYF staff and other professionals working with youth in care will receive specialized training focused on the latest and most effective strategies for working with this population.
 - **Objective 1.** Develop a training series with the Bureau of Organizational Learning and Quality Improvement specifically for DCYF staff working with adolescent clients. **(Year 1)**
 - **Action:** Due to the advent of other priorities in this past year including the DCYF Practice Model, the Permanency Roundtables, Solution-based Casework

and the Credit Report Training, training resources and staff time have been put into these areas. The Adolescent Program will reach out to the DCYF administration to see if this is something that the agency wants to pursue at this time.

- Goal J DCYF staff's ability to engage youth in planning for their future, including permanency, connections and adult living preparation will be evaluated on an ongoing basis.
 - Objective 1. Utilize case practice review instrument developed by the Bureau of Organizational Learning and Quality Improvement and the DCYF Adolescent Workers to evaluate adolescent practice at each district office until all are evaluated. (Year 4)

Action: Completed.

- **Objective 2.** Identify adolescent practice areas requiring additional training, policies and staff supervision.
 - **Action:** This is ongoing in conjunction with the results of the APPLA review component now used to review APPLA cases during case practice reviews.
- Goal K The New Hampshire DCYF will be ready to meet NYTD requirements starting in October 2010.
 - **Objective 5.** Investigate the possibility of hiring one or more former youth in care to: create an alumni social networking site, author a monthly alumni newsletter, and provide alumni with regular and ongoing adult living training opportunities. **(Year 1)**
 - Action: Partially Completed. A former youth in care was hired as a practice model youth consultant. This youth created a Youth Action Pool in order to get youth more directly involved in DCYF practice. A second youth consultant just started and is creating a Facebook page that will link alumni with the support, resources and opportunities available through the DCYF Adolescent Program. Alumni will be attending the Digital Stories training in June of this year. At that time the youth consultant will gauge the interest of alumni in having future alumni events.

Coordination with other federal and state programs for youth

In Fiscal Year 2012 the New Hampshire DCYF Adolescent Program continued to work with other programs that support homeless youth. This has included ongoing case consultation with the New Hampshire Department of Education Homeless Liaisons. The Homeless Liaisons work with unaccompanied homeless youth in each school district assisting them in getting full access to an education under the guidelines of the McKinney Vento Act.

In October of 2012 a DCYF Adolescent Worker participated in a panel presentation at the New Hampshire Homeless Conference along with the Director Homeless Education/Title I Coordinator/Migrant Ed, the Program Planning and Review Specialist for the New Hampshire Department of Health and Human Services Bureau of Homeless & Housing Services, a Homeless Liaison from the Rochester area and several representatives from local colleges.

The workshop entitled, "Reaching out to Higher Education: Creating Networks to Support Access To College and Success of Homeless and Foster Youth," focused on identification of barriers homeless and foster youth face in accessing college; and development of strategies to address barriers to support homeless/foster youth at college.

The Director Homeless Education/Title I Coordinator/Migrant Education has asked DCYF to consider doing a presentation at this year's New Hampshire Homeless conference to educate the homeless liaisons in attendance about appropriate reporting to DCYF as well as how we work with children, youth, and families to ensure safety, permanency, and well-being.

DCYF has become an active member of the New Hampshire Teen Task Force, a group of federal and local partners that includes representatives from the Homeless Liaisons, the Child and Family Services Transitional Living Program, the New Hampshire Department of Education and other stakeholders. The task force mission is to "End youth homelessness by promoting safety, well-being, permanency, life-long connections, and self sufficiency". The group is currently working on state rules for the establishment of New Hampshire's first homeless shelter for teens and young adults. DCYF has provided recommendations for the rules to ensure that youth utilizing the shelter are reported as being abused or neglected when applicable. In addition to the work on the shelter, the task force is planning an educational presentation in the fall of 2012 to bring awareness about the plight of homeless youth in New Hampshire.

In March of 2012, DCYF participated in the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Academy Implementation Clinic sponsored by the New Hampshire Bureau of Homeless and Housing Services. The clinic was conducted by the National Alliance to End Homelessness Center for Capacity Building. It included group discussions, system design and modification planning sessions, and presentations on best practices. Clinic participants received hands-on technical assistance with data analysis and system assessment in preparation for the clinic and follow-up implementation support.

The Adolescent Program has continued to pursue the use of Individual Development Accounts or IDAs. The Asset Development Program at Rockingham County Action presented their program at the October 2011 meeting of the DCYF Permanency, Adolescent and Resource workers. Information about the IDA program was included in the New Hampshire Teen Voices newsletter and a presentation is planned at the June 20, 2012 New Hampshire Teen Voices meeting.

Youth Vision

Since 2004, DCYF has been meeting and partnering with the Division for Juvenile Justice Services (DJJS), Department of Education (DOE), Department of Labor (DOL), Department of Employment Security (DES) and Vocational Rehabilitation, to better serve our shared youth.

The Department of Vocational Rehabilitation and Bureau of Behavioral Health came on board in 2005 and 2006 and since 2008, Division for Family Assistance, Bureau of Homeless and Housing Services, the US Department of Labor Office of Apprenticeship, the New England Farm Workers Council and the New England Migrant Farm Workers Council have joined what is now known as the New Hampshire Youth Vision state level team.

Local Youth Vision teams were formed in 2005 and were asked to determine at least one youth-related need in their community and attempt to address that need. Local youth vision team leaders have met with the state level Youth Vision team on a regular basis for additional guidance and support for their community change efforts. Each local team has a chair and a co-chair who attend yearly trainings conducted by the state level team. Since its start in New Hampshire the Youth Vision concept both on the state and local level, has accomplished a great deal to assist New Hampshire youth in care in achieving several purposes of Chafee.

The Keene team continues to hold a yearly "Job Fest" consisting of a large group of youth being brought together to learn job application and interviewing skills and to be matched with employers. The Manchester team again held a job/resource fair in their community as well as an open house at their local employment office called New Hampshire Works. The Strafford team conducted a career day and the Salem team is currently working on a Facebook page to get those in their community connected with helpful resources.

The Littleton and Portsmouth teams continued to collaborate with the local employment security office to create an employment skills program for youth in care. Through these programs job-seeking youth attend a series of workshops related to applying, acquiring and maintaining a job.

In addition to supporting the local teams, the focus of the state level Youth Vision team this past year has been Business Engagement. Two trainings related to this topic were conducted. The first, called Business Engagement occurred on April 13th. The focus was on how to establish effective relationships with business community to meet the specific needs of our business partners and job developers working directly in the field with youth, adults, veterans and people with disabilities.

The second training, Business Engagement 101: Preparing our Students for Work occurred on June 1st and focused on how adults working with youth can help youth become employed. The DCYF Adolescent Workers attended this training and brought back the skills they learned along with the information about resources back to their local offices for implementation by the caseworkers.

Training conducted in SFY 2012

In support of the goals and objectives of the CFCIP and to help foster parents, adoptive parents, group home staff, and case managers understand and address issues confronting adolescents preparing for independent living:

• The Adolescent Tool Box: This training is provided for newly hired staff two to four times each year. The training provides an overview of the challenges facing youth who age out of care, the importance of permanency, establishing a relationship with youth and

an overview of the DCYF Adolescent Program and available resources. Former youth in care frequently participate as co-trainers. The youth explain to the new staff how to establish a youth's trust, how to motivate them and how to use a positive youth development approach. In addition they provide suggestions on how to connect and plan with teens despite resistance.

- Adult Living Preparation: On August 11th at the 2011 DCYF Teen Conference, there were ten different workshops offered to current youth in care. Workshop topics included going to and paying for college, being cyber secure, understanding Job Corps, healthy relationships, financial literacy and choosing the right career. In addition to the workshops there was a town hall style meeting with DCYF Director Maggie Bishop and a scavenger hunt activity focused preparation for adulthood.
- **Going to College**: All trainings conducted by NHHEAF.
 - **File-A-FAFSA nights**: Held at DCYF district offices around the state for foster youth and their caregivers. Youth attendees received personalized instruction and guidance enabling them to successfully complete their FAFSA while at the training.
 - **STAR College Nights:** Overview of the college selection, admissions and financial aide process for youth and their caregivers. They are held at various district offices around the state.
- Granite State College (GSC): GSC is contracted through the DCYF Staff Development Partnership to provide training to foster parents, adoptive parents, group home and DCYF staff, and supported by training funds provided under the Title IV-E Foster Care Adoption and Assistance program. GSC will be conducting numerous trainings for caregivers and staff working with adolescents. The primary training regarding adult living preparation is the aforementioned New Hampshire Trails program. The New Hampshire Trails training is a twelve-hour course that will be offered on a regular basis throughout the state. Attending each New Hampshire Trails class is a combination of foster parents, residential and DCYF staff. GSC will also continue to provide other specialized trainings that focus on work with adolescents in care. They are offered on an as needed basis and include:
 - Connecting with Teens in Placement is a twelve-hour class that examines the impact of past trauma on adolescents and offers suggestions on making connections with youth.
 - Helping Teens Prevent Violence is a ten-hour course that examines the roots of violence and how divisions and differences among young people contribute to violence between children, adolescents and the adults they become.
 - Talking with Teens about Sexuality is a ten-hour course that explores how sexuality is a lifelong process that defines who we are as human beings, including our values, attitudes and behaviors as they relate to being male or female.
 - The Challenging Adolescent is a ten-hour class that covers a variety of behavior management techniques that will help participants develop an effective personal management style.

- Youth Panels: GSC continued the six-module FACES (Foster and Adoptive Care Essentials) training in 2011-2012. The FACES graduation includes a panel of current and former youth in care. The youth have talked about their experiences and have given suggestions to the new foster and adoptive parents regarding caring for youth in care.
- **Positive Youth Development:** The DCYF Adolescent Program specialist and a former youth in care provided this training to foster parents at the New Hampshire Foster Parent annual conference in November of 2012. The training entitled, "Empowering Youth, "focused on ways that caregivers can connect with youth in their care and help them to feel better about themselves and their future by utilizing a Positive Youth Development (PYD) approach.
- **Credit Report and Credit Resolution:** On May 9th 2012, the University of New Hampshire Cooperative Extension trained the DCYF Adolescent Workers on how to interpret credit reports and address any inaccuracies.
- **Kids in Court:** Conducted by the Model Court and the Court Improvement Program (CIP) and presented at the Attorney General's Task Force on Abuse and Neglect in September 2011 and at the DCYF Conference in May 2012. Topics included a review of the Model Court's new protocols to ensure child/youth voice in Court. Current and former youth in care who were members of the Youth Acting Pool (YAP) provided insight about their experiences. DCYF staff, Court Appointed Special Advocates (CASA) and other stakeholders were in attendance.
- **Strategic Sharing:** Provided by Casey Family Programs and occurred on July 13th and 14th 2011 and December 7th 2011. A total of sixteen youth were taught how to share their life experiences in a manner that is safe, comfortable and most impactful on DCYF adolescent practice. DCYF staff along with youth and parents formerly involved with DCYF were trained on how to provide the Strategic Sharing training to others. The intent is that DCYF will train a new pool of youth and parents on Strategic Sharing every year.
- **Engaging Youth:** Provided by Casey Family Programs and occurred on August 24th 2011. DCYF staff and other stakeholders in the Permanency Roundtable process were trained on how to effectively engage youth in this process so that they can assist in their own permanency effort.

Training to be conducted:

- **Digital Stories:** From June 27-29, 2012 ten youth will be trained by the Hunter College School of Social Work on Digital Storytelling. Digital storytelling uses the available tools of the computer and Internet, and morphs it with words and narration, with the final outcome being an interesting multi-media mix of images and voice. Digital Storytelling is a great way for to make sure that youth voice is heard and their message is effective. The focus of this workshop is to empower youth leaders to create a digital story reflecting their experiences while in care to help change and improve practice for future.
- Casey Lifeskills Assessment (CLA): Training to be provided to DCYF staff, foster parents, residential staff and youth on how to use the CLA tool as part of the Adult

Living Preparation process. The exact date is to be determined as Casey is currently making modifications to the existing CLA.

- Teen Conference: On August 9th at the 2012 DCYF Teen Conference, there will be ten different workshops offered to current youth in care. Workshop topics will include the safe use of technology, finding an apartment, managing your money, healthy relationships, renting an apartment, self advocacy, getting a two-year degree, getting a job, on a career path, the college admissions and application process and learning about Job Corp and gap year programs such as AmeriCorps and City Year. In addition, all youth attendees will be participating in a town hall style meeting with the DCYF/DJJS Director.
- **PRT Phase II Orientation and Skills training:** On July 27th there will be a training to familiarize staff with the Permanency Roundtable II meeting that includes the youth. The focus will be on engaging the youth before and during the meeting as a way to help them get on the path to legal permanency.

Trust Funds

DCYF does not have a trust fund program.

Youth Involvement

DCYF has two youth consultants both of whom have provided valuable input regarding agency practices at various meetings and conferences including the New England Permanency convening. Our Practice Model Youth Consultant has been the main driver of the agencies pursuit of normalcy. This has resulted not only in the aforementioned normalcy survey but the inclusion of this guiding principle in our practice model, "We support opportunities for children, youth and families to have "normal" life experiences." In addition this consultant has directly participated in the reviews of our residential facilities. She has also been a key member in the Effective Transitions to Permanency Project, a partnership with Casey Family Programs in which five residential facilities received consultation and assistance from national experts on youth permanency and the normalization of the lives of youth in residential care and the role of the parent.

Since June of 2008 the New Hampshire DCYF and New Hampshire DJJS have been collaborating with statewide representatives from residential facilities in an effort to decrease lengths of stay and improve permanency outcomes for youth placed in residential care. The participation of current and former youth in this initiative called Achieving Permanency Outcomes for Children and Youth in Residential Treatment: A Framework for Collaboration has been significant. New Hampshire Teen Voices has provided feedback on the collaborations recommendations, former youth in care have participated as members of the Framework's state level team and a mixture of current and former youth are members of the regional teams.

The theme of this year's annual Framework summit was, Youth Permanency: Working Better Together to Spread Success. A team of former youth in care and parents assisted with the event that was held on September 9th 2012 by telling their stories and participating in numerous

activities focused on achieving better outcomes for youth in residential care. A former youth in care, who is also the Practice Model youth consultant, assisted in the facilitation of the event.

Medicaid Coverage for former foster youth age eighteen to twenty

Youth who have aged out of the DCYF foster care system have the option to receive New Hampshire Medicaid up to the age of 19. New Hampshire has not yet used the option to expand Medicaid to cover youth ages 19 and 20.

Indian Tribe Consultation and Collaboration

In regards to consultation with Indian Tribes, New Hampshire currently has no federally or state recognized Indian tribes. Benefits through the ETV program are available to Indian children on the same basis as they are available to other children in the state. (See New Hampshire DCYF CFSP for more information related to DCYF and the Indian Child Welfare Act (ICWA).

Education and Training Voucher Program

The New Hampshire DCYF Adolescent Program administers the DCYF Education and Training Vouchers (ETV) program. The ETV program is part of Aftercare Services described in as previous section. In regards to the ETV program specifically, there is an application process that starts each year on January 1st. ETV is allocated per state fiscal year (July 1st-June 30th) based on each student's level of need that is established by subtracting grants and scholarships from the total cost of attendance. Also factored in is whether the student has been granted a tuition waiver through the Tuition Waiver for Foster Children Program. The amount left is declared as the student's "gap" and ETV funds are provided to fill that gap up to \$5000 per state fiscal year. This process ensures that students receive what they need and do not receive an excess of benefits.

The Tuition Waiver for Foster and Adopted Children Program has greatly enhanced the ability of youth in care of going on to college. The program provides up to twenty tuition and fee waivers per year to New Hampshire State schools for youth formerly in out-of-home placement through the New Hampshire Division for Children, Youth and Families. The New Hampshire Department of Education Division of Higher Education coordinates the program in collaboration with the New Hampshire DCYF. Applications are made available on or about January 1st each year. DCYF collects and certifies the applications and assists the Division of Higher Education in determining the twenty recipients based on level of need.

In an effort to maximize the number of applications the New Hampshire DCYF and Division of Higher Education start the application process in January and also make the application available on the Postsecondary Education Commission's website. DCYF Adolescent Workers work diligently with foster care youth to ensure that they met the institutional filing deadlines required by the colleges. The New Hampshire Higher Education Assistance Foundation (NHHEAF) Center for College Planning provide a series of statewide and regional trainings to foster care youth and their caregivers focused on the college admissions, application and financial aid

process. Despite lower numbers of youth in care there were thirty-eight applicants for the Tuition Waiver for the 2012-2013 academic year.

Going forward the New Hampshire DCYF and Division of Higher Education will continue their collaborative work to support and maximize the Tuition for Foster and Adopted Children Program. This will include working closely with New Hampshire colleges and universities to find ways to expedite the waiver notification process and to ensure that each tuition waiver applicant completes all of the required application and verification forms. This past year DCYF made sure that staff and youth were educated about the importance of the getting the verification form completed. Copies of the form were included in New Hampshire Higher Education Assistance Foundation's statewide and regional college trainings. In addition DCYF created a release of information form that allows youth to give DCYF staff permission to talk to the financial aid office on their behalf.

Other efforts to strengthen the postsecondary educational assistance program to achieve the purpose of the ETV program:

- Continuing the expansion of ETV eligibility to include youth who left state care after attaining 16 years old for relative guardianship.
- Continuing to disseminate Aftercare Services brochures that include ETV information to youth, staff and caregivers.
- Including the ETV application on the DCYF Youth Advisory Board website along with eligibility and contact information.
- Including information about ETV in the DCYF Youth Advisory Board quarterly newsletter that is sent to youth, staff and caregivers.
- Including information about ETV in the Foster and Adoptive newsletter known as the FAN letter that is sent out quarterly to current and former foster and adoptive parents.

New Hampshire Higher Education Assistance Foundation (NHHEAF) Collaboration

New Hampshire Higher Education Assistance Foundation (NHHEAF) is a statewide agency devoted to helping parents and their aspiring college students navigate the college selection, admissions and financial aid process. New Hampshire Higher Education Assistance Foundation and the DCYF Adolescent Program started a partnership in FFY 05 on behalf of college bound youth in care.

Beginning in 2009 New Hampshire Higher Education Assistance Foundation F was able to provide many additional resources and opportunities through a \$20,000 one-year grant it received from the New England Regional Council of the College Board. The grant was for a joint proposal submitted by the NHHEAF Center for College Planning in collaboration with New Hampshire DCYF called the Successful Transition through Awareness & Responsibility (STAR) program.

New Hampshire Higher Education Assistance Foundation will soon be awarding two current youth in care who were high school seniors with a \$3,500 stipend to be used for college tuition, room and board or other related costs.

New Hampshire Higher Education Assistance Foundation F was able to continue providing additional training, support and resources for staff and youth caregivers in 2011-2012 including:

- **File-A-FAFSA nights**: Held at multiple DCYF district offices for youth in care and their caregivers. Youth attendees received personalized instruction and guidance enabling them to successfully complete their FAFSA while at the training.
- **STAR College Nights:** Held at multiple DCYF district offices for youth in care and their caregivers. Overview of the college selection, admissions and financial aid process including the ETV program and the Tuition Waiver for Foster and Adopted Children program.
- **DCYF Teen Conference:** In August of 2011, New Hampshire Higher Education Assistance Foundation conducted three workshops at the DCYF Teen Conference focused on the college selection, admissions and financial aid process.

Initiatives Planned for SFY 2013

New Hampshire Higher Education Assistance Foundation will continue the trainings and initiatives described above and will also assist DCYF youth further by providing the following:

- Youth Presentation: For the first time the DCYF Adolescent Program and New Hampshire Higher Education Assistance Foundation are teaming up on July 26, 2012 to talk to youth placed in secure detention about options after high school including college, Job Corps and employment.
- **DCYF Teen Conference-** New Hampshire Higher Education Assistance Foundation continues to be a full partner in the conducting of the annual DCYF Teen Conference.
- **iamcollegebound.org**-An interactive website through which youth can earn prizes while learning about college resources. New Hampshire Higher Education Assistance Foundation will continue to arrange for special offerings for current and former youth in care.

ETV Statistical Information per academic/state fiscal years July 1st to June 30th:

See attached chart.

BUREAU OF COMMUNITY & FAMILY SUPPORT SERVICES

The Bureau of Community & Family Support Services provides services to families in their communities, with or without DCYF involvement, including:

• Funding for community-based programs that work to prevent child abuse and neglect, juvenile delinquency, and out-of-home placement of children and youth;

- Adoption/Post-Adoption Program and Services
- Foster Care Program and Services;
- Relative Care Specialist Services;
- Domestic Violence Prevention Services,
- Substance Abuse Prevention and Treatment Services,
- Residential Care Programs and Services,
- Jail Compliance Monitoring and Services,
- Educational Services; and
- ICWA implementation and Coordination with Tribes.

FOSTER CARE PROGRAM

The Foster Care Program provides licensed resource homes and a family experience for children who cannot be safely cared for in their own homes. The program consists of a manager or program specialist, a Resource Worker -at-large, a part-time Relative Care Specialist and a parttime Adoption Recruiter along with Resource Workers in each district office. The Foster Care Program Specialist function is to provide vision and leadership to programming related to out-ofhome care of children in the custody and or guardianship of New Hampshire DCYF. The Foster Care Program Specialist develops policy that will support the goals of family reunification and permanency for children and youth. In order to accomplish this task, the Foster Care Program Specialist seeks the input of the consumer of the services, the caregiver community and professional staff of the public and private agencies. This position is responsible for the monitoring and licensing of private Child Placing Agencies in the state along with the certification of those agencies wishing to provide, Individual Service Option Foster Care, a more intensive level of foster family care. The Resource Worker-at-large position is responsible for the processing and distribution of foster home licenses submitted by the district offices verifies accuracy of AFCARS information and maintains a central file as required by statute. This position also processes all criminal record checks, foster parent insurance claims and foster home data requests.

The District Office Resource Worker recruits, trains and licenses resource families, matches children in need of out-of-home care with an appropriate family and supports the foster, relative and adoptive parents in their catchment area. An internal shift in DCYF Administration and practice had occurred several years ago resulting in the Bureau of Community and Family Support joining the Foster Care and Adoption Programs into one entity. New Hampshire is considered a dual-licensed state and both foster and adoptive parents follow the same training, assessment and home study process. Recruitment and retention responsibilities and activities of the division are shared with our contract providers.

The division has an Educational and Training Partnership with Granite State College for resource caregivers and residential staff. The initial training for foster and adoptive parents was merged into one program referred to as FACES (Foster and Adoptive Care EssentialS) and more often; participants apply to be "foster-to-adopt" homes. All resource homes for DCYF have been informed that the expectation of fostering for New Hampshire includes engaging with birth

families. DCYF foster homes are required to engage with the birth family when children are placed into their care, when the permanency plan for that child is reunification with their own family and when safety has been assessed for all involved. When it is determined that a child cannot safely return home, it is a desired outcome that the foster family will be willing and able to provide that child with long-term stability and legal permanency through adoption.

Statistical information of Children/Youth in Foster Care

Results of the 2010 U.S. Census indicated that the State of New Hampshire reported a total population of 1,316,470. Of this total, 237,284 are minors under the age of eighteen. Child Welfare Outcomes Data obtained from the Administration for Children and Families shows that New Hampshire has been consistently reducing the number of children and youth placed in out-of-home care. Using September 30th as an annual point in time, the numbers of children in care have dropped from 1137 in 2006 to 730 in 2011. Most of these children enter care as a result of abuse and/or neglect in their family. Data indicates that the gender of children/youth in care averages out to be 57% male and 43% female (September 2011). The average age of a child in care is eleven years old.

| 730 Children in Placement on September 30, 2011 - Age and gender | | | | | |
|--|------|--------|-------|----------|--|
| | Male | Female | Total | % by age | |
| 0 to 3 years | 88 | 71 | 159 | 22% | |
| 4 to 6 years | 45 | 59 | 104 | 14% | |
| 7 to 9 years | 50 | 31 | 81 | 11% | |
| 10 to 12 years | 48 | 24 | 72 | 10% | |
| 13 to 15 years | 87 | 52 | 139 | 19% | |
| 16 to 18 years | 81 | 64 | 145 | 20% | |
| 19 and older | 16 | 14 | 30 | 4% | |
| Total | 415 | 315 | 730 | 100% | |
| % by gender | 57% | 43% | | | |

Length of Stay

The average length of stay for children in care on September 30, 2010 was 15.1 months.

Relative Care

As of April 30, 2012, 165 of the children and youth living in out-of-home care were residing with kin.

Reunification

51.3% of the young people leaving the system as of September 30, 2009 were reunified with their birth parent(s) or primary caregiver(s).

Adoption

In FFY 2011, 144 children and youth with state agency involvement were adopted from foster care.

Race and Ethnicity

The 2010 US census report found that 93.9% of New Hampshire residents were reported to be White. Placement data available from February 2009 reports the following racial-ethnic composition of New Hampshire children in care: 85.3% White, 4.3% Black, 7.1% Hispanic, 2.7% Multi-Racial, 0.5% Asian and 0.1% American Indian. New Hampshire continues to have more cultural diversity in the larger, more metropolitan areas of the State. The Northern, more rural areas of New Hampshire have not yet experienced that type of growth or population change. The United States Census actually showed an overall decline in the population in this area.

A current review of licensed resource homes in the state showed that over 11% of the resource families are documented as being multi-racial or of a minority background. That shows a small increase in the past few years. Less than 7% of our foster families stated that they were Hispanic in 2009. This data has not yet been updated. Several of our private Child Placing Agency/Foster Care Program partners have made concerted efforts to recruit resource families in neighborhoods and communities that have a higher percentage of ethnic populations. New Hampshire has a growing population of New Americans who have resettled in Manchester, Concord and Nashua neighborhoods. Recruiters are working with the local community and cultural leaders to explain and support the division's efforts to maintain children in their home communities whenever possible. The goal is to develop a number of resource families within these neighborhoods who will intimately understand the language, culture and traditions of the families and children who may become involved with the division. The table below shows the current AFCARS information of children in care.

Race and Hispanic or Latino Origin as of September 30, 2011 (AFCARS)

| | In out-of-home care | In state child population (2009- ACF) |
|--|---------------------|---|
| One Race | 94.9 % | 97.8 % |
| Two or More Races | 5.1 % | 2.2 % |
| White | 88.8% | 88.3 % |
| Black or African American | 7% | 2.2 % |
| American Indian and Alaska Native | 1.8 % | 0.2 % |
| Asian | 0.4 % | 2.5 % |
| Native Hawaiian and Other Pacific Islander | 0.4 % | <.1 % |
| Some other race or unknown | 6.7 % | 0.0 % |
| Hispanic or Latino Origin (of any race) | 8.2 % | 4.6 % |

Foster Homes

There are currently 703 licensed, non-relative resource homes in the State of New Hampshire. Approximately two-thirds of the homes licensed in the state (452) are managed by DCYF with the remainder (251) managed by private child placing agencies licensed by DCYF. There continues to be a steady decline in the number foster care homes over the past several years. DCYF collects data from former foster parent surveys, which are mailed to all foster homes that close from service. Each year, information is gathered regarding the reasons for closure. The most common causes given for closing are adoption of the foster child in the home, changes in household or the family's frustration in waiting to be matched for adoption. It is believed that some foster families choose to close their license as a result of the enhanced focus on requiring work with birth families.

| | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------------------------------|------|------|------|------|------|------|
| Number of DCYF foster homes | | | | | | |
| (April) | 650 | 612 | 645 | 637 | 571 | 508 |
| Number of new foster homes licensed | 147 | 175 | 126 | 107 | 113 | 138 |
| Number of homes closed | 171 | 157 | 132 | 139 | 181 | 273 |

The division manages homes that are licensed as general, specialized, respite, emergency and adolescent homes. A higher level of care is available for children and youth who have specialized needs. Individual Service Option Foster Care or ISO Care is a service provided by a contracted, private child placing agency. The private agency recruits foster parents who can provide an intensive level of child supervision and is part of the treatment team. At least one foster parent must be available to the child at all times. Only one foster child is allowed in the home unless siblings are placed with the same family. Daily telephone and weekly in-person contacts are made by the agency. Additional training is required of the foster parents to assist in meeting the physical and psychological safety needs of the children in care and their families.

Matching the child with a resource home considers the foster parent's ability to meet the unique needs of the child and family. DCYF does not delay placement into care due to matching issues and works with community members that represent different cultural, racial or ethnic backgrounds to build and support cultural competency within the resource family pool, and to ensure that resource families are culturally responsive to child(ren)'s needs regardless of whether they have different backgrounds.

Fostering Connections

New Hampshire continues to follow the core elements of the Fostering Connections Act in regards to foster care. Many discussions have occurred and the state understands the importance and benefits to youth of extending care to age 21. The agency continues to review children individually and makes every attempt to meet their needs. This is the same for the Guardianship Assistance Program. New programs have been developed, however, to allow older youth to voluntarily return to care on a short-term basis if they require assistance. There is at least one identified resource home in each area of the state that has volunteered to provide a home for older youth. The state has worked tirelessly in regards to sibling placement, notifying relatives and waiving non-safety licensing standards for relatives. While New Hampshire rules have always promoted sibling placement, detailed policy was developed to ensure that siblings would be placed together unless it was contrary to their best interests.

The Division has a part-time Relative Care Specialist who connects with community-based services, supports and assists all relative care placements with the assistance of Relative Care Liaison in each district office. A 30-day relative notification process has been established as policy and a relative inquiry tool is started at the first contact with a family. The Relative Care Liaison in each office has access to Accurint, an Internet-based search engine, to enhance the searching capability of the workers. More relatives are being identified and utilized as natural placements and supports for children who are at risk of removal from their own families. Waivers for non-safety related licensing requirements are being approved for relative caregivers who choose to become licensed. This is beginning to reduce the overall need for non-relative foster care and a trend that DCYF believes will continue.

Partnering with the community and families is a fundamental philosophy of the Division. Foster and adoptive parents are linked closely to the neighborhoods, communities and cultural, ethnic, and religious groups that make up the community. They work and perform daily activities and contribute to the vitality of the community while serving children in care. Development of the plan by local recruitment and retention teams in each district office makes operational the belief that keeping children in their own communities in close proximity to their parents, schools, and other significant people in their lives will enhance the safety and well-being of children. Community placements can also increase the probability that the parents and children will be reunified.

Recruitment and Retention Efforts

New Hampshire has continued to provide for the diligent recruitment of potential foster and adoptive families that reflect the needs as well as the ethnic and racial diversity of children in the

State for whom foster and adoptive homes are needed. DCYF develops annual local plans with Recruitment and Retention Teams that consist of the local DCYF Office Supervisors, the Resource, Permanency and Adolescent workers, as well as foster and adoptive parents, community representatives and others as appropriate. The meeting is lead and documented by the current contractor for Recruitment and Retention Services. In a standardized format, plans are submitted by the team to be included in the statewide plan.

A needs assessment is conducted by reviewing staff requests, community needs and monthly statistics over the past year to assist the Team in targeting the specific recruitment and retention efforts to produce desired outcomes. In addition, the number of inquiries, the number of home studies in process that would produce licensed homes and identification of retention practices in the local office is reviewed. The plan includes a review of the children and youth referred for foster and adoptive placements in the previous year. Their individual safety, well-being and permanency issues are considered in the development of new recruitment goals and objectives. A Statewide Plan is to compliment the eleven local plans and provide support and cohesiveness to the local activities.

Child and Family Services (CFS) is the current contractor selected for the Recruitment and Retention and Technical Support to Foster Parents. CFS has used a multimedia approach to bring attention to the need for foster and adoptive parents in New Hampshire. They have aired a television commercial featuring a young man who was adopted by his foster parents. They have sponsored radio interviews and public services announcements along with printed advertisements and campaign posters. CFS has coordinated events at local businesses for both recruitment and support. CFS also oversees access to funding for the local offices. The Resource Worker in each office is responsible for communicating the fiscal needs to support recruitment or retention events in each area. One part-time Administrator and two part-time recruiters are working to fulfill the requirements set forth in the contract.

The Division has always recognized and appreciated that the best recruitment tool for new foster and adoptive families is a well-supported network of current foster or adoptive families. There remains a strong collaborative relationship with the New Hampshire Foster and Adoptive Parent Association (NHFAPA) and DCYF values the hard work and commitment of the parents actively involved with this Association who offer peer support to fellow families and work hard to recruit new families to serve children in need. NHFAPA has had some difficulties over the last year. They continue to employ an Executive Director but have not been able to find the funds to maintain this as a paid position. The State had been offering them start up funds in the past through a technical support contract but these funds were shifted towards recruitment and retention efforts. NHFAPA has been unable to secure grant funding and has had minimal success with fundraising events. The Division would like for them to remain a strong and viable resource for the foster and adoptive families in our state.

A new Request for Proposal for the Recruitment, Retention and Technical Support to Foster Parents will be released in early 2013. It is unknown at present as to whether this will be for one or two years. DCYF will once again be looking for several exciting proposals to help the state move forward with its recruitment and retention work.

Update on Initiatives

The Foster Care Program has continued to expand our Central Inquiry system for potential foster and adoptive parents. State Office staff is responsible for the initial contacts with interested parties for all but three of our district offices. This ensures that consistent and timely information is being given to people wanting to learn and/or start the licensing process and that less interested or undecided people have a better understanding of the expectations before working with a local Resource Worker. This has taken a bit of work and pressure off of the field staff allowing them to work more closely with the children and families on their caseloads. The three offices that have chosen to work directly with a potential applicant share the contact information with Central Inquiry for data entry. Central Inquiry is now able to track when and how an inquiry is referred to us, whether or not they have registered for training, whether or not they have completed training and whether or not they have obtained a license. Starting next month, the system will also be capturing whether or not the potential applicant is familiar with a past or currently licensed foster care provider.

The Foster Care Program had been approved to start a recruitment and informational campaign through social networking sites. The intent was to work closely with the Department's Public Information Office to build a recruitment strategy using "Twitter" and "Facebook". The Foster Care Program has partnered with Public Information to utilize the existing Department social media sites to announce Foster Care events and appreciation but has not yet built their own sites. The development of a "realistic job preview" video for potential foster parents continues to be a goal for the Foster Care Program. It is anticipated that more focused attention will be given to recruitment through social media once this tool is completed, approved and available.

A Parent Mentoring Program is being designed in collaboration with the Division's Parent Partner Program. This new initiative involves building a service that will match experienced foster parents as mentors to birth parents working towards reunification. DCYF had an opportunity to learn about this approach through a peer-to-peer training session with Washington State. The Design team is meeting regularly to develop the components of this program. Funding for this program has yet to be decided.

As a result of the Division's involvement with the Breakthrough Series and its efforts to have New Hampshire become a more trauma-informed system of care, many small changes have been made when making a foster care placement. A phone call is made to birth parents on the night of placement to assure the family that the child is safe. DCYF is striving to have a visit arranged within 24-hours. When it is safe for the children to do so, the birth parent or other family member is encouraged to be a part of the placement process to lessen the trauma felt by the child. All of these changes have resulted in a continuous review process of the training and support that is offered to our resource families.

New Hampshire continues to have a presence on the fostercaremonth.org website, which lists planned activities and New Hampshire notes including "A Proclamation" from Governor John Lynch. DCYF holds several foster and adoptive events during the year in cooperation with the Community and Faith-Based Initiative, NHFAPA and other community partners. For example, an adoption celebration was held in November 2011 for adoptive families. Several Adoption events where held to connect children who were free for adoption with families looking to adopt.

The 5th annual New Hampshire Foster and Adoptive Parent Conference was held in November 2011 with a theme of "Embracing the Future Together". DCYF and the CFBI coordinated the 6th Annual Foster Care celebration for foster and adoptive families statewide. DCYF remains committed to participating in the National Adoption Month initiative during November of each year and the National Foster Care Month initiative each May.

Goals and Expectations for 2013:

- Continue our partnership with our recruitment, retention and technical assistance contractor, Child and Family Services as we work towards enhancing recruitment and retention strategies for resource homes, support for our foster, relative and adoptive parents and assistance in finding permanent homes for waiting children.
- Strengthen the collaboration between all state partners who are involved with the recruitment and retention of foster and adoptive families including our Community and Faith Based Partners, Wendy's Wonderful Kids and all of our private Child Placing Agencies.
- Work closely with our Public Information Office to utilize the various social media outlets to enhance public awareness of the Foster Care Program along with our recruitment and retention efforts.
- Expand our Central Inquiry System to continue the consistent messaging that is given to all prospective foster and adoptive parents throughout the licensing process and to track the effectiveness of our recruitment initiatives.
- Continue our diligent efforts to recruit permanent families for New Hampshire's current waiting children and ensure that youth exiting foster care receive the support, information, resources and life-long connections they need to reach their potential as young adults.
- Continue to support relative caregivers through licensing waivers for non-safety related requirements, referrals to community-based supports and training
- Consistently assess foster parents to ensure that we are meeting their needs as resource families, especially in relation to the child placed in their home.
- Continue to partner with NHFAPA to ensure that the organization remains a strong and viable resource for foster and adoptive families along with retaining their advocacy for children in need.
- Support all foster resource families through training and supervision as they engage more closely with birth parents and develop a better understanding of the importance of family connections for all children.
- Work closely with our Parent Partners Program to complete the design and launch a Reunification Mentoring Service in New Hampshire in which experienced foster parents would provide one-on-one coaching to birth families working towards reunification.

- Provide additional resources and training to all families and providers to better understand the effects of trauma on children and families and to ensure the coordination of community-based care.
- Incorporate the Practice Model Beliefs and Principles and strategies, such as Solution-Based Casework into the practices of the Foster Care Program.

RELATIVE CARE SPECIALIST

In April 2008, New Hampshire DCYF hired a part-time Relative Care Specialist whose role is to:

- Develop knowledge of all relative care and community services available in New Hampshire and develop a database of DCYF relative care providers.
- Analyze and track data on the Bridges system to monitor the number of children placed in relative care homes.
- Contribute to a newsletter with information specifically targeted toward relative caregivers.
- Maintain and distribute a resource guide for relative caregivers that provides available services in New Hampshire.
- Partner with New Hampshire Relatives as Parents Program on statewide initiatives including conferences.
- Collaborate with the Bureau of Elderly and Adult Services to help relative caregivers access the Older American's Act respite funding.
- Revise and keep current the DCYF Relative Care policy and all related forms.
- Collaborate with Granite State College to develop and maintain a course for relative care providers.
- Collaborate with the Division of Family Assistance (DFA) to provide a mainstream (Temporary Assistance for Needy Families (TANF) application process for Relative Caregivers who receive placement of a child in DCYF care.
- Responsible for monitoring and submitting waivers that allow relatives to accept placement of children and become licensed for foster care.
- Work with the Family Resource Centers to develop programs and supports for relative care providers.
- Provide specialized consultant services and training to the DCYF staff in the area of relative care and post-adoption services.
- Offers direct support to all relative care providers throughout the State of New Hampshire.
- Provide information and referrals to the community regarding Relative Care Resources and supports.

- Monitor the division's compliance with the Relative Notification Requirements of the Fostering Connections and Increasing Adoptions Act of 2008.
- Research and analyze information on relative care programs to assist in program development for New Hampshire relatives.
- Monitors and provides support to the field for completion of all necessary forms for the Bridges system to assure timely services are provided and ensures that payment of bills and statistical information for the DCYF is accurate and complete for compliance with federal, state, and division laws and policy.
- Survey the needs of field staff to develop and provide training on issues related to bestcase practice when working with birth parents, children and providers involved in relative care.

The Relative Care Program continues to assist in the development of programs to support relative caregivers and community professionals who work with them.

A Relative Care Liaison is identified in each of the district offices. The Relative Care Liaison assists in monitoring all relative care placements and is responsible for bringing information from State Office to the field regarding relative policy and procedures. In the majority of the district offices, the Resource Worker is fulfilling the role of the Liaison. The Relative Care Liaison in each office has access to Accurint, an Internet-based search engine, to enhance the searching capability of the workers. More relatives are being identified and utilized as natural placements and supports for children who are at risk of removal from their own families.

A Relative Care Committee meets quarterly and membership consists primarily of each relative care liaison.

The tracking method for Relative Notification requirements was revised and additional training was provided to field staff to increase compliance with the Fostering Connections and Increasing Adoptions Act of 2008. Between December 2009 and April 2012, DCYF placed 528 children in the custody of the State of New Hampshire.

A significant increase in the number of notifications to adult relatives of these children is noted. The report reflects that notification letters were sent to relatives within the 30-day time frame for 167 of 528 children. Letters were completed outside of the 30-day time period for 177 children. Letters were not sent for 100 children and for 60 children in placement, the relative notice was not sent for a specific documented reason.

A new training curriculum was developed for Relative Caregivers in collaboration with Granite State College. *Relatively Speaking* is an online e-workbook course that is covered in three 3-hour modules. The course has been offered four times since its inception and each course has been well attended. All New Hampshire Relative Caregivers are eligible to take this course.

During the 2011-2012-time period, a total of fifteen relative providers were granted a non-safety related waiver for licensing requirements. Twelve waivers were granted for pre-service training, two waivers were granted to relative caregivers who did not have a high school diploma and one

was granted to waive car insurance. This practice is expected to continue as a way to encourage and promote relative foster care.

An improved tracking method for all relative caregivers with a child placed in the custody of New Hampshire is in place. Queried numbers reflect both non-licensed and licensed relative providers. The improvements reduced the need to rely on district office resource workers to provide up to date and accurate information on each relative provider in their office. In April 2012, 161 New Hampshire children were placed in relative care.

A Relative Care Program brochure was created and can be used as an assessment tool when a family member is considering being a placement option for a child or youth. The brochure provides information to relative caregivers on what to expect and what is required when becoming a DCYF relative caregiver. The brochure will assist the CPSW in engaging with family members to provide relevant and accurate information about becoming a provider for the State of New Hampshire. Printing of the brochure is currently in process.

The Resource Guide for New Hampshire Relative Caregivers continues to be a widely used resource throughout the state. The guide remains available online via the Internet. Distribution throughout the state to increase awareness of the guide is still an area of need.

Information about available resources for relative caregivers continues to be provided to the community and to relative caregivers both within DCYF and those not involved with DCYF.

The TANF agreement re-introduced in May 2011 remains in effect in each district office. Training took place on both an administrative and district office level to support the field in its implementation. The process involves a relative caregiver completing a DFA application for assistance on the first day of placement. Once signed by the relative, the CPSW ensures it gets to the fiscal specialist immediately, thus preventing the unnecessary delay of financial support to the relative caregiver.

A change was made in the title of DCYF's Newsletter for Foster Care and Adoptive families, formerly called the FAN (Foster and Adoption Newsletter). This change was done to be inclusive of relative caregivers. The new title is The CONNECTOR and each issue features an article specific to relative care.

NEW HAMPSHIRE COMMUNITY AND FAITH-BASED INITIATIVE

In July 2004, DCYF and New Hampshire faith leaders attended a national summit on recruiting in the faith community as part of the "Answering the Call" initiative. As a result, representatives from different faiths, community members, and DCYF developed an advisory board for faith-based initiatives. In response to this collaboration, the Community and Faith-Based Initiative (CFBI), with oversight and coordination from Bethany Christian Services, was formed in 2005. In its first year, the CFBI's work started in six New Hampshire regions covered by DCYF district offices. By the fall of 2006, the initiative had expanded to all twelve catchment areas, providing support for DCYF and foster families statewide. Since then, CFBI has continued to grow and expand.

Three CFBI representatives throughout the state are now serving the eleven district offices and the telework unit. The many presentations to churches and other community organizations have garnered much new support. One innovative development was "Faithfully, One-by-One." This is an email listing used to disseminate information of the individual needs of foster and adoptive families and children. This list has grown to include over 550 individuals. Through these e-mail "alerts" and through distribution of the CFBI newsletter, many needs for goods and services have been met. The CFBI also has 68 individuals who serve as community liaisons to assist with meeting the needs through their faith, business or community organization.

During this FFY 2011 the CFBI assisted the Division for Children Youth and Families in the following ways:

- Through the Operation Christmas Joy initiative CFBI was able to provide gifts to three hundred sixty-five children as well as providing gifts to each youth at the Sununu Youth Services Center;
- Thirteen requests for furniture were met, these were primarily for beds for children coming into care;
- CFBI was able to find temporary housing for a family of seven so that the children could remain with their family;
- A septic system design was donated to a family in need of this service
- Two more electricians joined the renovations teams to provide renovations to homes for the purposes of foster home licensing; and
- Other needs that were met included car seats, bikes, camperships, clothing, backpacks, school supplies, laptop computers, gift cards and many more

During this time period over one hundred new contacts with faith-based and community organizations were made and approximately thirty families were referred to the DCYF Foster Care Program from various speaking engagements.

The CFBI once again partnered with DCYF to sponsor the Foster/Adoptive Family Appreciation Event, which they have done for the last five years. This year the event was held in the center of the state at Spaulding Youth Center in Northfield. More than 20 different organizations and businesses partnered to provide entertainment and food for the event. The sponsoring businesses included; The Altrusa Club; McDonalds; Stonyfield Yogurt; The Common Man; Chili's Restaurant; The Children's Literacy Foundation; Plymouth State University; Kohl's Department Store, and many more. More than fifty individuals donated their time to volunteer to help at the event. The event was a huge success and plans are already underway to hold the event at this location again next year.

The assistance of our Community and Faith-Based Initiative grows each year and is an invaluable help for the children and families that we serve.

ADOPTION PROGRAM

Adoption is the preferred permanency outcome for children in care for whom reunification efforts have been unsuccessful. The Adoption Program provides an array of services to families who adopt children through DCYF. These services include:

- Case management
- Education
- Information and referral
- Adoption assistance
- Medicaid
- Support groups
- Assistance to adoptees searching for their birth families

143 adoptions were finalized from October 1, 2010 to September 30, 2011.

In 2011, the adoption assistance policy was diligently revised and updated to reflect changes in current practice. The adoption assistance application and adoption assistance agreement were updated as well to be consistent with the newly revised policy.

The New Hampshire Department of Health and Human Services/Division for Children, Youth and Families licenses all child-placing agencies in New Hampshire. In addition to ensuring that the New Hampshire Adoption Child Placing agencies adhere to the licensing requirements as described in the Administrative Rules He-C 6448, DCYF chairs the quarterly meetings held by the New Hampshire Adoption Child Placing agencies. These meetings have consistently brought between ten and twelve participants from the different agencies and have been very effective at keeping everyone apprised about changes, new legislation, and adoption practice in the areas of private, inter-country and foster care adoption.

Voluntarily Mediated Adoptions

Effective January 1, 2006 New Hampshire passed the legislature to implement voluntarily mediated adoption for children in the care of DCYF. Voluntarily mediated adoption (VMA) provides an opportunity for all parties to participate actively in a court-approved mediation program to create a timely permanency plan of adoption for the child. The goals were to facilitate voluntary surrenders rather than complete lengthy termination of parental rights proceedings, and to encourage older children to consider adoption if contact with birth parents could continue.

From October 1, 2010 to September 30, 2011, Forty-eight mediated adoptions were completed

DCYF, in partnership with community providers, has worked collaboratively to establish an array of recruitment resources for adoptive families for children in care. The list below illustrates the many available resources:

The Heart Gallery Project

The Heart Gallery is a project initiated by the New Mexico Department of Youth and Families as a way to recruit adoptive families for waiting children. DCYF partnered with Jordan's Furniture and the Massachusetts Adoption Resource Exchange in creating the permanent New Hampshire Heart Gallery in the Jordan's Furniture store in Nashua.

DCYF continues to partner with the New Hampshire Professional Photographers Association and some individual volunteer photographers to take photos of waiting children. There are currently over 30 photographers who are volunteering their time and services for this project. A local printer has agreed to donate the 20x24 photos needed for the gallery at a greatly reduced cost. In addition, each child receives a framed 8x10 photo.

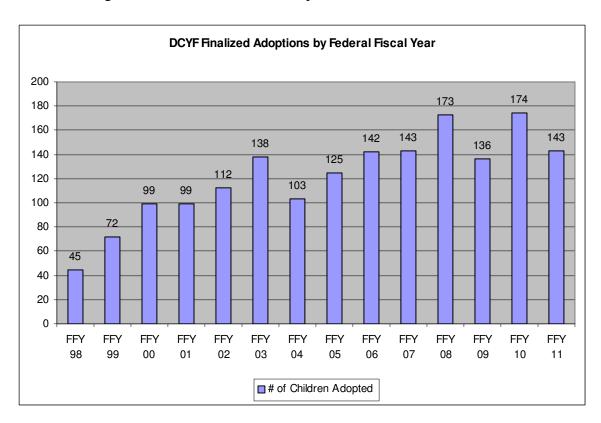
The permanent Heart Gallery created in collaboration with the Massachusetts Adoption Resource Exchange (MARE) remains displayed at Jordan's Furniture in Nashua, New Hampshire as well as at the DHHS Brown Building 4th Floor and Thayer Building. The Heart Gallery has been a great resource in finding permanent placements for New Hampshire waiting children. To date, over 65 portraits have been taken since the program's inception. In past years, New Hampshire DCYF has been able to use the Heart Gallery as a traveling display at various locations around the state such as Dartmouth Hitchcock Medical Center in Lebanon, the Whittemore Center at the University of New Hampshire, the Discovery Center and the Capital Center for the Arts in Concord.

Wendy's Wonderful Kids

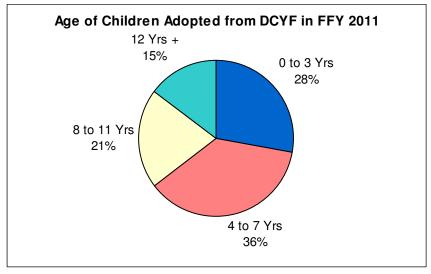
Starting in December 2007 DCYF has also partnered with Bethany Christian Services in another recruitment project—Wendy's Wonderful Kids (WWK) through the Dave Thomas Foundation for Adoption. Bethany is the recipient of a WWK grant that funds an adoption recruitment position to focus on those children considered hard to place. This position carries a caseload of eighteen to twenty children throughout the state. WWK, in partnership with the Community and Faith-Based Initiative also sponsored adoption parties for waiting DCYF children in 2008, 2009 and 2011. WWK has also been an active participant in our Foster Parents Appreciation event that takes place during Foster Care month in May. Overall, WWK has been involved with several matches and placements of older youth waiting for adoptive families.

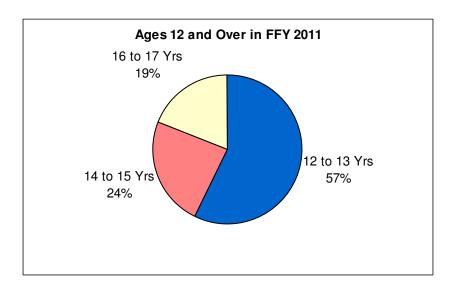
DCYF Permanency staff have been trained on using the AdoptUSKids website as well as the Massachusetts Adoption Resource Exchange (MARE) website for recruitment. State Office staff are also available to assist field staff with these recruitment efforts. Waiting children are regularly featured in the Foster/Adoptive and Relative Care Newsletter, The Connector, as well as in the Community and Faith Based Initiative (CFBI) newsletter.

The ongoing focus on permanency has resulted in 143 adoptions in FFY2011. Although this is a decline from last year, it is reflective of the agency's ongoing efforts at reunification and maintaining children in their own homes. This has decreased the number of children coming into care and remaining in care that are in need of adoptive families.



DCYF has made concerted efforts to locate adoptive homes for older children in care. As a result, twenty-two percent of all adoptions occurring in FFY 2010 were of children age twelve or older. This trend has continued with fifteen percent of all adoptions occurring in FFY 2011 were of children age twelve and older. And nineteen percent of those children were sixteen to nineteen years old.





DCYF has responded to the needs of adoptive families by supporting a Post-Adoption Services Unit to provide direct support and service referrals for adoptive families. These services are available to families who have adopted children through DCYF, and through private adoption – including children adopted from other countries.

POST-ADOPTION PROGRAM

As New Hampshire increased efforts on many levels to recruit families willing to adopt, DCYF recognized its responsibility to commit to addressing the ongoing needs of adoptive families. DCYF understands that adoption is a life-long process and as such, the needs of children and their families do not end when an adoption is finalized. DCYF has always provided some level of post-adoption services, however in 2007, with the support of funding from PSSF, the Post-Adoption Unit with specialized staff was created.

The intent of the Post-Adoption Program is to support and promote healthy, stable families where adoptive children can flourish. DCYF advocates for and provides a leadership role in educating the community toward an increased understanding of post-adoption issues. DCYF envisions being a resource for ongoing information and services related to adoption. Post-adoption services are provided in a variety of ways, including individual and group contact and work with community-based agencies. Since its inception, the Post-Adoption Program efforts have included:

- Development of a Post-Adoption Services brochure;
- Meeting with district office staff to assess post-adoption needs and planning activities to address those needs;
- Providing information to adoptive families through the foster/adoptive newsletter;
- Promoting the use of New Hampshire Foster/Adoptive Parent support groups to adoptive parents;

- Creation of folders containing information on resources for adoptive families (January 2009);
- Development of a post-adoption services policy to guide the provision of services, post-adoption service agreement and post-adoption contact forms (Finalized in 2010);
- Develop training specific to meet the needs of adoptive parents. Three classes are now offered: Your Family and Adoption, Exploring Adoption and Adoption Services and Resources which includes a resource fair component and the cooperation of post-adoption unit staff, district office staff and local providers (Completed and began offering in 2008); The Exploring Adoption Class has been updated and will now be offered in it's new form by adoption staff and adoptive parents starting in the summer session of 2012. The new revised training will better prepare families for the adoption process.
- In April of 2009 a Post-Adoption Supervisor position was created to supervise the staff in charge of birth family searches, and to oversee the development of the Post-Adoption program. Additional hours were added to one staff position to assist with the development and to provide direct service to adoptive families. Another part-time position was added to the unit in January 2011;
- In 2010 the Permanency workers in each DO were identified to act as the post-adoption contact person for their district office. These identified staff will keep track of requests for information and resources from adoptive families by filling out post-adoption contact forms and forwarding them to State Office. The Post-Adoption Supervisor will be able to keep complete data on what adoptive families are requesting, and follow-up to see if the information and resources provided to them met their needs. The Post-Adoption Supervisor is able to meet with Permanency staff regularly at their permanency meetings;
- A part-time adoption staff person conducts follow-up phone calls with adoptive families that have requested assistance to help determine the effectiveness of the information and resources that were provided;
- The Post-Adoption Unit is assisting more birth and adoptive parents in resolving issues related to their voluntarily mediated adoptions;
- In 2011 The Post-Adoption Unit began providing assistance to district office staff to search and make contact with relatives and other connections for children in need of permanency. In 2011 the unit assisted with 14 cases;
- A new training entitled, *Adoptions That Last*, about preparing and transitioning families and children in the adoption process was developed for district office staff in January 2012 and was presented to supervisors and permanency staff from all district offices and is now being rolled out to all district office family service staff. This will be completed in August 2012.

The following statistics were gathered for January - December 2010:

| Post Adoption Service Statistics 2010 | | | | |
|---------------------------------------|----------------------------|-----------------------|-------------------|--|
| Category | Total Search & Post- Adopt | Post-Adopt Intakes | Search Intakes | |
| Information and referral | 95 | 57 | 38 | |
| Field Consults | 20 | 8 | 12 | |
| New Case Opened | 156 | 23 | 133 | |
| Total Intakes | 271 | 88 | 183 | |

In 2011 the Post-Adoption Unit began to collect data on the presenting issues when a person calls for services and what services were provided. This will allow us to better track and meet the needs of adoptive families.

The following statistics were gathered for January – December 2011:

| Contacts | | Primary Issues | |
|------------------------|-----|------------------|-----|
| Search | 161 | Search | 161 |
| Post Adoption | 105 | Respite | 3 |
| Connections search | 14 | Mental Health | 43 |
| Total Contacts | 280 | Education | 22 |
| Services Provided | | Medical/Develop. | 43 |
| Information & Referral | 114 | Camp/Enrichment | 0 |
| Field Consults | 30 | Transition age | 3 |
| Post Adoption case | 8 | VMA problems | 3 |
| Search case | 111 | Financial | 8 |
| Connections search | 14 | Other | 23 |

The following statistics were gathered for January – April 2012:

| Contacts | | Primary Issues | |
|------------------------|----|------------------|----|
| Search | 33 | Search | 36 |
| Post Adoption | 22 | Respite | |
| Connections search | 2 | Mental Health | 12 |
| Total Contacts | 57 | Education | 6 |
| Services Provided | | Medical/Develop. | |
| Information & Referral | 18 | Camp/Enrichment | |
| Field Consults | 10 | Transition age | 1 |
| Case Management | 4 | VMA problems | 1 |
| Search case | 21 | Financial | 5 |
| Connections search | 2 | | |

Goals for DCYF Post-Adoption Program for 2012:

Continue to develop training for DCYF staff to help them assist adoptive families with planning for adoption and post-adoption services. This would include:

- Develop a training for DCYF staff to assist them in completing a more comprehensive adoptive home study;
- Continue to provide advanced training to DCYF staff that will focus on issues surrounding adoptions such as family engagement, difficult conversations, preparing families for adoption, practice changes and adoption subsidy. A new training, Adoptions That Last, is being provided to every district office staff in 2012;
- Expand the training to foster/adopt families to include a more comprehensive training regarding sensitive issues such as budgeting and finances (purpose of adoption subsidy). Some of this information has been incorporated into the Exploring Adoption training and will be provided to families in 2012;
- Continue to provide training in attachment therapy and trauma therapy to mental health
 providers and to DCYF staff to help them have a better understanding of the services and
 treatments that will be successful interventions for adopted children and their families;
- Continue to develop ways to help adoptive families access respite, including some respite day programs for teens;
- Track outcomes for post adoption service requests and develop a Logic Modal to measure the effectiveness of Post-Adoption Services;
- Post-Adoption staff will continue to assist the district offices in recruiting for waiting children and finding relative connections. We are now doing this; and
- Identify and/or develop new services that will meet the needs of families adopting children with special medical, educational, emotional and behavioral health challenges.

CHILDREN ADOPTED INTERNATIONALLY WHO HAVE ENTERED STATE CUSTODY

In 2005, New Hampshire DCYF developed a Bridges data collection component for intercountry adoptions. This report reflects the following information:

In SFY 2011, no internationally adopted children entered state custody. However, three children adopted internationally are currently involved with the Juvenile Justice System and are detained at the Sununu Youth Services Center under delinquency.

ACTIVITIES THAT THE STATE HAS UNDERTAKEN FOR CHILDREN ADOPTED FROM OTHER COUNTRIES

DCYF post-adoption services are offered to all adoptive families. We provide information and referral, respite support, short-term case management and counseling.

The State of New Hampshire has ten licensed adoption child placing agencies available to families who have the capacity to complete inter-country adoptions. All adoption agencies must be licensed by the State of New Hampshire, DCYF, as a child-placing agency. This allows the agency to conduct home studies, make placements of children, supervise the placements and file adoption petitions in the court of jurisdiction. RSA 170-E:27 states, "No person may establish, maintain, operate or conduct any agency for childcare or for child-placing without a license or permit issued by the department..." RSA 170-E:30 allow DCYF to examine the facility or agency, and investigate the program and person or persons responsible for the care of children. The institution or child placing agency must obtain and provide receipts of approval of state and local requirements pertaining to health, safety and zoning. In addition, per RSA 170-E:29 DCYF conducts criminal records and central registry checks on staff employed by the agency.

In New Hampshire, the directors of the adoption child placing agencies meet every three months. The members discuss current issues and concerns in the practice of adoption. The agencies have collaborated on standards for the placement of children in adoptive homes. These standards are based on New Hampshire law, agency policy and good practice. The standards adopted as rules in April 2003 were revised and adopted in April 2011.

The New Hampshire Child Placing Agencies have seen a decline in the number of international adoptions in the past year while private adoptions appear to be on the rise. The decrease in international adoptions is attributed to the fact that many countries have changed their adoption policies. Child placing agencies are focusing more on recruitment efforts, home studies and post-adoption services such as searches.

New Hampshire statute addresses specific adoption requirements for inter-country adoptions. If the child is adopted from another country the adoption petition must include documentation indicating compliance with RSA 170-B:28. "Any person or any public or private agency, corporation, or organization, before bringing or causing any child to be brought into this state from any other state or country for the purpose of adoption, or receiving such child in this state for such purpose, shall make application to the commissioner of the department. Such application shall be in the form prescribed by the commissioner and shall contain such information as the commissioner may require, including any information required to comply with the provisions of RSA 170-A. No placement of the child shall occur until permission has been obtained from the commissioner. No petition for adoption of a child from another state or country shall be granted in the absence of compliance with this section." This responsibility has been delegated to the Administrator for the Interstate Compact on the Placement of Children.

In addition, New Hampshire statute also addresses the legality of international adoptions. RSA 170-B: 29 states "A decree of court terminating the relationship of parent and child or

establishing the relation by adoption issued pursuant to due process of law by a court of any other jurisdiction within or outside the United States shall be recognized in this state and the rights and obligations of the parties as to matters within the jurisdiction of this state shall be determined as though the decree was issued by a court of this state."

COMMUNITY-BASED COMPREHENSIVE FAMILY SUPPORT SERVICES

Comprehensive Family Support

During SFY 2012, contracts were awarded through a Request for Proposals process (RFP) for statewide comprehensive family support programs covering all eleven district office and the telework unit's catchment areas. Through the Comprehensive Family Support Program, community-based agencies provide support services to approximately 1,031 families annually (2010 CFSS Data). The programs assist families and children by promoting family wellness, decreasing family stress, and preventing abuse and neglect. Agency staff identifies and assist families with multiple stressors by providing multivariate services, which encourage and promote the development of healthy families. The program seeks to intervene before the occurrence of abuse or neglect on behalf of all families and also serves families in the process of reunification.

Goals:

- Promote healthy growth and development of children by assisting families in identifying and addressing any home or community barriers to children's success in school and the larger society;
- Empower families as advocates for themselves and their children by collaborating with families and communities in the development of a comprehensive array of local, family-centered and culturally diverse services; and
- Reduce the incidence of violence towards children by providing supportive services to families including:
 - Supporting parents who are experiencing social, emotional, physical and/or mental health related problems that interfere with their abilities to parent and provide an acceptable standard of care for their children;
 - Promoting safe, nurturing environments for children by educating parents in child development, child health and safety, and parenting skills;
 - Working with parents to identify their strengths and challenges related to parenting, with consideration to family, values, culture and/or personal history, and to assist them to deal effectively with overcoming barriers that impede healthy development;
 - Helping families learn coping and problem-solving skills which will assist them in their every day lives;
 - Enhancing family development by assisting parents to further their education, find employment and access community resources; and

• Supporting families in their home communities by providing resource and referral information, and linkage with Family Resource Centers and other community-based agencies that support families.

Services to be offered by the contract agencies include:

- Home Visiting;
- Trauma Informed Services;
- Early Childhood Programs/Child Development Education;
- Parent Education and Support;
- Quality Early Care and Learning;
- Medical & Health Education;
- Adult Literacy and Higher Education support;
- Life Skills Training;
- Family Mentoring and Advocacy;
- Independent Living skills; and
- Childcare Resource and Referral
 - Family Empowerment
 - Information and Referrals to other community-based agencies

Evaluating Outcomes

Utilizing Title IV-B, subpart 1 fund, DCYF provides the financial support necessary for the New Hampshire Children's Trust, Inc. to conduct an in-depth analysis of the needs of families participating in family support programs across New Hampshire and of the impact of the programs serving them. The Family Support Outcomes Evaluation measures the impact of strengthening protective factors in all counties in the state. These data, from 455 parents in 2005, 1,200 in 2006, 918 in 2007, 532 in 2008, 817 in 2009 and 862 in 2010 provide demographic information as well as reliable information about the impact of family support programs.

The data gathered from the Outcome Survey explores whether or not a direct correlation could be determined between participant satisfaction in the programs and change in protective factors, which are:

- Supportive Relationships;
- Accessing Resources;
- Parental Confidence;
- Sharing Parental Concerns;

- Meeting Family Needs;
- Standing Up for Family Needs; and
- Reducing Family Stress.

The data that show that the changes across all family support programs were statistically significant at the .0001 level. The outcomes are used to inform program practice and public policy. Full reports are available at http://www.nhchildrenstrust.org/.

The Comprehensive Family Support program is also evaluated by DCYF. Under the direction of the DCYF Bureau of Organizational Learning and Quality Improvement, DCYF is moving toward a system of outcome-based contracting. Beginning with Comprehensive Family Support, in 2007, the Auditing Specialist worked collaboratively with providers to create a set of standardized outcome measures and design a data collection and reporting system. Outcome areas include:

- Characteristics of target population;
- What are the services needed and at what intensity; and
- Success of the program in avoiding future DCYF involvement.

Data are obtained from tracking the graduating class following discharge from a comprehensive support program for three successive years. "Graduating Class" is defined as any child seventeen years old or younger who had left a comprehensive family support program and had a treatment plan during and at the conclusion of program participation.

Findings from the 2007 class through three successive tracking years show:

- 31% of the children first entering a program were referred by DCYF during an assessment of the family.
- 88% did not have a DCYF case opened for the one year following completion of the program.
- Of the 12.0% of children and their families that did have a DCYF case opened, 7.1% of children required out-of-home placement immediately and the remaining 4.8% remained in their homes with intensive services.
- The average participation in a comprehensive family program was 209 days.

Findings from the 2008 class through two successive tracking year show:

- 35% of the children first entering a program were referred by DCYF during an assessment of the family.
- 90% did not have a DCYF case opened for the one year following completion of the program.
- Of the 9.9% of children and their families that did have a DCYF case opened, 5.9% of children required out-of-home placement immediately and the remaining 4.0% remained in their homes with intensive services.

• The average participation in a comprehensive family program was 190 days.

Findings from the 2009 class through one successive tracking year show:

- 35% of the children first entering a program were referred by DCYF during an assessment of the family.
- 94% did not have a DCYF case opened for the one year following completion of the program.
- Of the 5.6% of children and their families that did have a DCYF case opened, 2.4% of children required out-of-home placement immediately and the remaining 3.2% remained in their homes with intensive services.
- The average participation in a comprehensive family program was 192 days.

Findings from the 2010 class through one successive tracking year show:

- 42% of the children first entering a program were referred by DCYF during an assessment of the family.
- 94% did not have a DCYF case opened for the one year following completion of the program.
- Of the 6.2% of children and their families that did have a DCYF case opened, 2.9% of children required out-of-home placement immediately and the other 3.3% remained in their homes with intensive services.
- The average participation in a comprehensive family program was 192 days.

New Hampshire Children's Trust, Inc.

DCYF maintains a strong relationship with the New Hampshire Children's Trust, Inc. (NHCT) whose mission is to prevent child abuse and neglect in New Hampshire. In 1996, the NHCT was designated as the lead agency to receive and distribute CAPTA Title II (Community-based Family Resource and Support) funds. Currently, the organization receives approximately \$200,000, an amount that is based on the state's child population. The NHCT braids the yield from its endowment and other contributions with the CBCAP funds and makes grants through a competitive process to community-based programs. Criteria for receiving a grant from the NHCT include:

- **Primary prevention**. The highest priority of the NHCT is to support programs designed to promote the general welfare of all children and families before abuse or neglect occurs. Programs are accessible to everyone, but may target populations at risk for abuse and neglect. Programs focus on education and training in child development, parenting, and skill building for parents. They may also include health and developmental screenings to identify children at risk and general information and referral services.
- **System building**. The NHCT is particularly interested in funding programs that are a part of a community-wide plan to improve the child and family service system.

- **Building program capacity**. The NHCT is committed to helping programs develop stronger boards, well-trained staff, and effective organizations. Up to thirty-percent of a grant request may be used to build the long-term capacity of the program.
- Under-served communities. Many New Hampshire communities lack basic family-centered, family support programs and services. The NHCT solicits proposals for new projects in communities where resources for these programs are lacking or where funding has been significantly disproportional with other communities in the state.

In September 2004, Prevent Child Abuse America (PCAA) designated the NHCT as the New Hampshire Chapter of Prevent Child Abuse America, thus consolidating and strengthening the voice and resources for prevention in the state. In 2006, PCAA selected NHCT to be one of 9 states for its two-year evaluation project funded by the Centers for Disease Control and Prevention (CDC). NHCT is working with colleagues across the country to develop enhanced and effective techniques of evaluation and assessment, particularly around integrating evidence-informed and evidence-based practices (EBP) into the organizational culture of grant making and of grantees.

In 2007, in honor of its 20th anniversary, NHCT launched its Strengthening Families in Community Libraries Project, aimed at equipping all of New Hampshire's libraries with parenting information and DVD's that are universally accessible. Individuals, businesses and foundations have funded this to date. Over half of the state's libraries reaching nearly 70% of the state population have participated. The state library, Family Resource Connection, has been an active partner in this project.

NHCT has fully complied with the new EBP standards required by the Children's Bureau in 2006, by conducting regular workshops and trainings for its grantees and other agencies providing family support programs. Peer learning activities are conducted, along with a rigorous schedule of reporting for grantees. The newest development in training is Continuous Quality Improvement, so that agencies and staff can meet the highest standards of professionalism.

In addition to the evaluation and support of Comprehensive Family Support providers, NHCT is a key partner with the DCYF Bureau of Community and Family Supports and Child Development Bureau in the Strengthening Families Initiative. Finally, the Administrator of the DCYF Bureau of Organizational Learning and Quality Improvement and a representative from the DHHS Bureau of Maternal and Child Health are members of the Board of Trustees.

DCYF EDUCATION SERVICES AND SUPPORT

DCYF is currently involved in a statewide project that seeks to embed the work of the agency's former education specialists in case reviews, training, and informing policy development, school districts, courts et al. and state level Department of Education (DoE) staff.

The division participated with the National Resource Center for Permanency and Family Connections on an initiative "Child Welfare, Education and the Courts: A Collaboration to Strengthen Educational Successes of Children and Youth in Foster Care". The division seeks to

have improved outcomes for children in out-of-home placement by ensuring that children are granted every opportunity to experience educational success, without lapses in attendance and academic curriculum.

Currently, DCYF is involved in two key statewide initiatives. First, there is the collaboration with others in the Court Improvement Project's Education Protocol subcommittee. New Hampshire assembled a team of professionals together to work diligently to remove barriers to educational successes for children and families. Some of the activities related to this goal is:

- Data mapping to determine proximity to children's placement and school districts;
- Identification of educational liaisons to work with DCYF to improve educational outcomes;
- Collaboration with Information and Technology Systems to assist in the development of an electronic means to communicate data;
- Revisions to the case plan completed with families. To include language specific to efforts to maintain educational stability to children and youth in care; and
- Identification of barriers related to transportation for children placed outside of their sending school district.

Through this project New Hampshire anticipates improved education outcomes for children in out-of-home placement by the coordination of services, i.e., transportation, case management, and continuity of services by the collaborations among school districts, sending school and DCYF.

SPECIFIC MEASURES TAKEN IN RESPONSE TO THE INDIAN CHILD WELFARE ACT (ICWA)

DCYF is committed to ensuring that provisions of Indian Child Welfare Act (ICWA) are meaningfully followed.

According to the 2011 United States Census, the total New Hampshire population was 1,318,914 persons with less than 0.2% of the population reported being American Indian/Alaskan Native, representing a decrease from the 2000 census report and equal to the 0.2% reported in the 1990 Census. While the indigenous people of this state included Abenaki and Penacook tribes, American Indian/Alaskan Native residents of the state reported over 4,000 tribal affiliations with federally recognized tribes.

Early and accurate identification of American Indian ethnicity ensures interventions and case plans that meaningfully address the child's heritage. The identification and verification of all children's ethnicity, including "American Indian/Alaska Native" is established, if at all possible, during DCYF's initial family contacts during the assessment phase. New Hampshire DCYF has in place a Case Review system for each child receiving foster care under the supervision of the State. Through this and the Permanency Planning Team Process, all individual aspects, including race and ethnicity of each child in placement are considered to facilitate safe, stable

and fulfilling reunification or other permanency opportunities. DCYF also provides a preplacement preventive services program designed to help children at risk of foster care placement remain safely with their families (See Comprehensive Family Support).

DCYF has maintained a relationship with the director of Wijokadoak, Inc., a New Hampshire based non-profit organization advocating for individuals who are of Abenaki and other tribal descent. This representative began consultations with the former DCYF Staff Development Bureau in 2005 regarding development of a revised course curriculum, a contracted instructor, and specific materials and training goals to be utilized regarding the Indian Child Welfare Act. As a result of this partnership, staff training on (ICWA) is incorporated into DCYF's Core training curriculum for new employees. An information table on the Indian Child Welfare Act is available at the DCYF Annual Conference.

Coordination with Tribes

In addition to the actions addressed above, New Hampshire DCYF began discussions with members of the Abenaki Community in March 2006. The purpose of the discussions centered on how there should be some formalization of an American Indian group in New Hampshire, and how DCYF can partner with that group to better address the needs of Native American families and their children. Long-term benefits to DCYF would include having a common spokesperson that can represent the collective American Indian community.

Greater awareness building about foster care recruitment/licensing among this community increases the likelihood that if a child is temporarily removed from home, s/he can be placed with a similar American Indian family. Finally, this group can provide better direction for DCYF to engage in meaningful, formal relationships with recognized tribes in nearby states.

In March 2007 representatives of Wijokadoak invited New Hampshire Department of Health and Human Services DCYF and Bureau of Minority Health to join in a meeting with the Governor of New Hampshire to advocate for formal State Commission of Native Affairs. During the following month, DCYF staff joined with Wijokadoak to provide a joint presentation at the National Indian Child Welfare Association's national conference, regarding the Native American culture in New Hampshire, as well as DCYF's efforts to recognize and respond children and families who are Native American, in ways that honor all aspects of their heritage and individuality.

Through 2008-2009, DCYF maintained a close collaborative working relationship with Wijokadoak, ensuring that cultural needs were assessed and addressed for Native American children and families living in New Hampshire. Ongoing efforts continue in order to educate board members of Wijokadoak regarding the Chafee benefits to native-American youth, focusing on the availability of scholarships for those qualifying youth pursuing higher education.

Effective July 20, 2010, the New Hampshire legislature established The New Hampshire Commission on Native American Affairs. The purpose is to recognize the historical and cultural contributions of Native Americans to New Hampshire, to promote and strengthen their heritage, and to further address their needs through state policy and programs. The commission is

currently establishing committees including a Social Services Committee that might be assigned work on child welfare issues. Administrative and field staff met with two representatives of the commission to begin to discuss collaboration between the Division for Children, Youth and Families and the commission. Two goals were considered. The first is to work toward better education and training about the Indian Child Welfare Act in the community (judges, CASA staff and mental health clinicians) and with DCYF staff. The second goal is for representatives of the commission to consult with DCYF staff about ICWA issues and on specific cases. If the commission votes to allow the Social Services Committee to work with DCYF we will further refine these goals.

In the past year the training that has been provided to the Model Court partners has an Indian Child Welfare Act component, which will be included if/when the Model Court project is instituted statewide. We will continue to work with the Court Improvement Project to ensure that the letter and the spirit of the Indian Child Welfare Act are carried out.

DCYF Administrators and field staff participate in quarterly conference calls with regional Indian Child Welfare Act Managers. Through this participation we connect with other states about Indian Child Welfare Act issues such as programs for monitoring compliance, training models that other states have developed, and specific case related issues. We will continue our participation over the next year.

New Hampshire has developed a case-planning document that is completed at the time of assessment to ensure our continued compliance with Indian Child Welfare Act related issues for children and families in contact with the division.

THE DOMESTIC VIOLENCE SPECIALIST PROGRAM

Since 1997, New Hampshire has benefited from having co-located Domestic Violence Specialists (DVS) in each district office. This program is funded through Violence Against Women Act (VAWA) funds, the Family Violence Prevention and Services Act (FVPSA) as well as Title IV-B funds.

The DVS program is an ongoing partnership with the New Hampshire Coalition Against Domestic and Sexual Violence (NHCADSV) who provide staff from local crisis centers to work in the district offices providing case consultation, direct services, and referrals for families experiencing the co-occurrence of domestic violence and child maltreatment.

The Domestic Violence Specialists provide six essential roles that result in a coordinated collaborative response to co-occurring child maltreatment and domestic violence:

- Increase access to local community crisis centers for victims of domestic violence who are also referred to DCYF;
- Provide consultation for child protection staff to improve domestic violence practice within the district office;
- Interventions, safety planning, and family-centered case planning;

- Facilitate cross training between child protection staff and the local crisis center;
- Provide consultation to other Health & Human Services Divisions located in district offices; and
- Provide community education regarding domestic violence.

During the past year training has been provided to DCYF staff regarding Solution-Based Casework and the Practice Model. Domestic Violence Specialists have attended training on both subjects. Domestic Violence training programs for DCYF staff has been updated to reflect these initiatives.

DCYF has continued its work on increasing the agency's Trauma Informed Practice. This initiative fits closely with the current focus on trauma informed treatment and services that the coalition is establishing through two projects, New Hampshire Bridges Project and the Trauma Informed Child Welfare Practice to Improve Placement Stability: A Breakthrough Series Collaboration. Both projects are working to increase both our workforces' knowledge of the impact of trauma on the children and families we serve and to increase the number of trauma informed treatment providers and services available to families who have experienced trauma. This will positively impact the services and experiences for families who are involved in the Child Welfare system as well as experiencing Domestic Violence.

FIRST STEP: APPROACHES TO THE CO-OCCURRENCE OF CHILD MALTREATMENT AND SUBSTANCE ABUSE

Project First Step involves the co-location of Licensed Alcohol and Drug Abuse Counselors (LADCs) in DCYF District Offices. This program was first initiated as a Title IV-E demonstration project from 1999 to 2004 has been maintained through Title IV-B and CAPTA funds.

LADCs are involved as consultants with staff to help reduce barriers to treatment, such as access to community-based services and programs and to provide ongoing training to staff regarding alcohol or other drug abuse issues and screening techniques. LADCs may become involved directly with parents or caretakers when it is determined that there are degrees of alcohol or other drug abuse (AODA) co-occurring with alleged or substantiated child abuse or neglect. If there are primary indicators of significant parent or caretaker AODA, LADCs provide a direct substance abuse assessment and initiate referrals to community-based treatment if such treatment is indicated.

During the assessment process, LADC services result in enhanced Community-based Family Support. During in-home Family Service cases, LADCs provide services consistent with Family Preservation. For those cases in which children are in temporary out-of-home care, LADC services help to expedite reunification or placement into kinship care, consistent with services attributed to Time-Limited Family Reunification. In those situations in which the concurrent permanency plan is adoption, LADCs continue their role as consultants in the case planning process, and continue to have the capacity for direct service for parents or caretakers when there are no other treatment resources available.

Currently the project has expanded to include LADCs in Berlin, Manchester and our Southern District Offices. The Berlin First Step program was completed in collaboration with the Community Mental Health Center. The expansion of the program to the district offices in the southern part of the state is indicative of the need identified by staff and through the results of Case Practice Reviews. Quantitative data regarding the number of assessments that have a risk indicator pertaining to alcohol or substance use was used to determine the areas of highest need. This program has proven to be an asset in early identification, assessment and case planning for families who have alcohol or substance abuse as a significant factor in their DCYF involvement. At this time, we have not been able to expand the number of LADCs to other offices but we have worked hard to make the LADCs we have be a shared resource between offices with high needs as well.

The incorporation of DCYF and DJJS has placed increased demand on this vital resource and the current LADC staff at Sununu Youth Services Center and the district offices have been instrumental in making this work by maximizing their resources throughout the state.

BUREAU OF CHILD DEVELOPMENT

The Child Development Bureau's mission is to:

- Help communities develop and maintain programs for young children that are healthy, safe, and appropriately responsive to children's physical, social, emotional, and cognitive development needs; and
- Enhance the capacity of child care programs and providers to provide preventive and protective services to children and their families.

To achieve its mission, in collaboration with community and state partners, the bureau provides technical assistance, support, and training to early care and education programs. Family education is also provided; guiding caretakers in choosing high quality and affordable child care programs.

The bureau also monitors providers and develops policy for New Hampshire's \$28,318,736 child care scholarship program. Families may be eligible according to income, participation in employment, education/training for employment, job search activities, and/or the need for a strength-based parenting program. Due to a decreased caseload, the Child Development Bureau did not need to reactivate the child care scholarship wait list. We will carefully monitor the budget to determine if a wait list will be needed during the next fiscal year. As we did previously, we will continue to exempt children receiving preventive and protective services from the wait list.

In the past year, the Child Development Bureau participated in the Casey Foundation Early Development Science and Child Welfare convening. The New Hampshire team brought together child protection, community and family supports, child welfare training and child development staff with Head Start, child care and early childhood mental health providers to develop a State plan to enhance child welfare practice with young children. The team continues to meet to

monitor and promote implementation of the plan. Fully one half of the plan has been implemented in seven months. In addition, the Child Development Bureau participates with community agencies and other stakeholders on numerous initiatives to prevent child abuse and neglect. Examples of these initiatives include home visiting, Children's Trust, the National Association for the Education of Young Children and Head Start.

STRENGTHENING FAMILIES THROUGH EARLY CHILDHOOD EDUCATION

Developed by the Center for the Study of Social Policy (CSSP), Strengthening Families is an approach to preventing child abuse and neglect through building five Protective Factors in families: Parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need, and children's social and emotional development. Research shows that these factors reduce the incidence of child abuse and neglect by providing parents with what they need to parent effectively, even during times of significant stress. By building relationships with families, programs can recognize signs of stress and build families' Protective Factors with timely, effective help.

In 2005, the CSSP designated New Hampshire as one of the seven states in the country for their Strengthening Families Initiative (SFI). Designated as the lead agency, DCYF has partnered with the New Hampshire Children's Trust Fund (NHCTF) in building protective factors for New Hampshire's families thus promoting the safety and well-being of children in their home and reducing incidents of child abuse and neglect. Some of approaches New Hampshire is currently using to achieve its mission are to:

- Incorporate Protective Factors curriculum into collegiate and advanced learning early childhood education courses:
- Provide training and technical assistance on Strengthening Families and Self-Assessment to childcare programs through the Childcare Resource and Referral Network's contract with DCYF;
- Adding Strengthening Families models to the Bureau of Child Development Professional Development System and Quality Rating and Improvement System; and
- To address child and adult health needs, the Child Development Bureau is training childcare programs to provide nutrition education and increased opportunities for physical activity to children and their families through "I Am Moving, I Am Learning" and "Let's Move! Child Care."

Further information about New Hampshire Strengthening Families Initiative is located at: http://strengtheningfamilies.net/images/uploads/pdf_uploads/New_Hampshire.pdf

HEAD START STATE COLLABORATION OFFICE

The Head Start State Collaboration Office (HSSCO) seeks to improve long-term outcomes for children in families with low incomes by promoting collaboration among the Head Start

community, state policy makers, and program administrators, professionals from early childhood and related fields and family representatives. Toward this outcome, resources from the Collaboration grant are used to create, support and sustain collaborative relationships and initiatives among Head Start and its natural state and community partners in ten priority areas established by the Head Start Act. These areas include: health care, homelessness, welfare (TANF), child welfare, childcare, family literacy, disabilities, community services, education, and professional development.

Last year the Office of Head Start identified four areas in particular as high priorities for HSSCOs:

- 1. Head Start/public school transition and alignment;
- 2. Professional development (opportunities for early childhood professionals to receive credentials from institutions of higher education);
- 3. Early childhood systems building; and
- 4. Regional Office of Head Start priorities, such as working with military families.

The following are examples of HSSCO initiatives in collaboration with multiple DCYF Bureaus (Child Protection, Child Development, Community and Family Support Services, Bureau of Organizational Learning and Quality Improvement):

WATCH ME GROW (WMG).

Watch Me Grow is a statewide, coordinated system of developmental screening, referral and early identification of concerns regarding young children aged birth to six years and their families, including those with founded cases of abuse or neglect in compliance with CAPTA. This year twelve WMG sites at Family Resource Centers conducted 690 screenings on 584 children, 18.99% of whom were referred for further evaluation and 9.8% of whom were scheduled for rechecks. Additionally, a WMG partner (Baby Steps) screened 3,972 children, 4.3% of whom were referred for further evaluation. (Please see "Watch Me Grow" section below for additional details.)

EARLY CHILDHOOD AND FAMILY MENTAL HEALTH (ECFMH) COMPETENCY SYSTEM.

Under the leadership of the New Hampshire Association for Infant Mental Health, 140 early childhood professionals participated in training and self-assessment on a proposed set of competencies for early childhood and related providers. DCYF staff compiled the self-assessment data on behalf of the project, which showed that, in all but five of the twenty areas in which participants rated their level of competency, the greatest number were in the "intermediate" skill level (versus foundation, advanced and specialist levels). These data will help inform the design of New Hampshire's system. The ECFMH Competency System advisory board (on which DCYF participates) is in the process of identifying a sustainable "home" for the ECFMH competency system.

Head Start/Early Head Start and DCYF Memorandum of Understanding.

Head Start programs have partnered with DCYF District Offices over the past year to implement a Memorandum of Agreement that was updated in August 2011.

Spark NH.

Spark NH is New Hampshire's Early Childhood Advisory Council required under the Head Start Act of 2007. Over the past two years, DCYF has played a key role in the formation, funding and leadership of the Council, including co-authoring the ARRA grant application for state councils, serving as Council chair, and leading/participating on numerous Council subcommittees, task forces and work groups. Included are professional development, quality of early childhood programs and services, Web site design, executive committee, needs assessment task force, early childhood data system committee, sustainability workgroup, and evaluation committee. DCYF was the recipient agency for the ARRA funds and monitors grant progress and spending.

INFANT MENTAL HEALTH

DCYF staff continues to actively participate on the New Hampshire Association for Infant Mental Health (NHAIMH) Board of Directors. NHAIMH is an organization comprised of professionals in the field of infant mental health, community providers, and representatives of partnering programs and family support and advocacy organizations. Its mission is to identify and disseminate information, research, and best practices that promote interdisciplinary efforts on a community level in order to strengthen relationships in families with infants and young children. NHAIMH supports public policy initiatives that promote positive child outcomes and enhance continuity of care for children and families throughout the early years. Infant mental health addresses all systems of development for children birth to six years, emphasizing the interaction of factors that effect social/emotional health and development.

NHAIMH has successfully provided an annual statewide conference for the past fifteen years as a means of increasing available infant mental health expertise in New Hampshire. NHAIMH has provided ongoing community education and awareness through offering round tables and making presentations at conferences, including those sponsored by the New Hampshire Association for the Education of Young Children, New Hampshire Association for Family Childcare Providers, the Early Education and Intervention Network of New Hampshire, New Hampshire DHHS DCYF Child Development Bureau. The association also provides as a community service, a bi-monthly e-mail brief addressing early childhood issues of concern.

In 2011, NHAIMH received a two-year grant (co-authored by DCYF staff) from the New Hampshire Endowment for Health to create an Early Childhood and Family Mental Health Competency System for New Hampshire (described previously).

Watch Me Grow

Also supported by Title IV-B, CAPTA, Head Start State Collaboration Office and other DHHS funds, the Watch Me Grow Pilot (WMG) was launched in 2008, providing an opportunity to develop a sustainable system to ensure that families with children birth to six years in New Hampshire are consistently able to access developmental information, support, health and developmental screenings. The goal was to support twelve regional WMG sites throughout the state over three years, which was accomplished during the past year.

The implementation of WMG includes a voluntary screening system for New Hampshire children birth to six years. The purpose of the pilot was to identify the processes and procedures necessary to administer a statewide screening system in all regions/districts/ communities of the state and to collect data and information necessary to inform statewide model development and replication.

In fall 2010, pilot sites officially became WMG regional sites, with ongoing responsibility for conducting and/or coordinating screening activities in their regions and reporting data to the state via a recently launched Web based data system. This role is filled by a community-based agency that has expertise in child development and family centered service delivery. In the pilot sites, staff assists parents and primary caregivers in administering the screening tools if requested, including the ASQ and ASQ-SE.

The following guidelines are in place for the Watch Me Grow sites:

- Services (screenings) are voluntary (families are not obligated to participate);
- Services are provided with the recognition that the parent knows the child best;
- Services are provided without cost to the family; and
- Referrals are provided in the areas including but not limited to oral health, physical health, vision, hearing, social emotional (including trauma treatment), communication, gross and fine motor, cognition, self-help, nutrition, comprehensive health, and sensory integration.

Each site has an evaluation plan that includes indicators collected throughout the course of the contract period. DCYF will use the self-evaluation material during the quarterly review of the program outcomes. Sites use common screening tools and reporting forms and data are collected to facilitate monitoring on the individual, agency and statewide level. Sites will continue to receive technical assistance and support from the state-level WMG Steering Committee, which includes DCYF staff. Data from WMG screening activities were presented previously.

BUREAU OF ORGANIZATIONAL LEARNING & QUALITY IMPROVEMENT

ORGANIZATIONAL STRUCTURE

The New Hampshire Division for Children, Youth and Families (DCYF) has made significant strides over the past year toward its ongoing goal of becoming a learning organization based on Senge's five disciplines of Personal Mastery, Team Learning, Shared Visioning, Mental Models and Systems Thinking. With the merger of Juvenile Justice Field services and the Sununu Youth Services Center within DCYF and the resulting reorganization of resources, the opportunity arose to form a full quality improvement infrastructure by combining quality assurance and improvement, policy, data, and training into one bureau, responsible for these activities across all three areas of practice.

The Bureau of Organizational Learning and Quality Improvement (BOLQI) is now made up of five teams that reflect these functional areas, and includes twenty staff with experience from all three of these areas of practice. Existing Juvenile Justice Staff in the areas of training, policy, and data joined BOLQI over the last year, enriching and coordinating the agency's collective resources. Additionally, BOLQI has expanded the scope of quality improvement beyond internal activities to include work with external providers, in the form of quality assurance activities with community-based providers, investigations of abuse or neglect within residential and foster care homes, and management of the registry of individuals found to have abused or neglected children.

The BOLQI has also continued to lead the development of an agency-wide Practice Model, relying upon these five drivers of organizational improvement now blended into one bureau to support implementation in close collaboration with other bureaus. As intended, the Practice Model has become the overarching framework for changes in practice, and is in staggered stages of development across the three practice areas. DCYF was able to create its federal Program Improvement Plan in response to the 2010 CFSR within the existing Practice Model framework, and the BOLQI manages both activities to allow for a synchronized approach. Additionally, the Practice Model continues to afford the opportunity to work with a Parent and a Youth Consultant, who also lend their voices to the organizational learning cycle as members of the BOLQI team.

QUALITY ASSURANCE AND IMPROVEMENT

The Case Practice Review (CPR) & Practice Improvement Initiatives (PIIs)

The New Hampshire Division for Children, Youth and Families (DCYF) Bureau of Organizational Learning and Quality Improvement (BOLQI) is responsible for quality assurance and the oversight of state quality improvement processes which include data collection, research and analysis, program improvement, and training.

The key component of performance measurement and accountability in New Hampshire is the Case Practice Review (CPR) process. The ACF CFSR framework and the On-Site Review Instrument (OSRI) drive New Hampshire CPR's. CPR's identify organizational and staff strengths, as well as areas needing improvement in each district office by focusing on outcomes for children and families in the areas of safety, permanency and well-being. Additionally, New Hampshire BOLQI integrates an Appreciative Inquiry (AI) approach into the pre/on-site/and post-CPR activities to support an organizational learning cycle.

Once a district office is selected as a CPR site, BOLQI begins the process by randomly selecting sample cases divided proportionally between Child Protective Service (70 +/- %) and Juvenile Justice Service (30 + %). In-home and placement cases are reviewed for both CPS and JJS.

After cases are selected and preparations are completed, the case review and quality assurance teams travel to the district office to begin the five day on-site review component. The reviews extend beyond the information available in Bridges and the case file to include interviews of staff, family members, providers, and children/youth, if age appropriate.

Reviewers are paired in teams, which include experienced DCYF staff from across the state that volunteer to participate and have received both training and coaching in the CPR process. Additionally, at least one community stakeholder is recruited to participate as a reviewer at each CPR.

Feedback from key stakeholders, representative of the types of organizations and individuals who are an integral part of the community support system for CPS/JJS youth and families, is obtained either through a focus group or an online survey. The purpose of the stakeholder feedback process is to collect information to examine systemic factors that may be impacting the quality of services for that particular district office catchment area. Issues addressed include areas such as prevention, in-home services, effective reunification/permanency, supporting independent living efforts, adoption, and effectiveness of caseworker interactions.

At the end of the week long on-site review, BOLQI shares initial statistical and thematic results with DCYF supervisors, field administrators, case practice and quality assurance reviewers in a closing two-hour session. These sessions include an opportunity for reflective feedback and discussion with staff to validate CPR initial findings and support transparency in practice assessment.

An exit conference is held with all district office staff following the CPR where BOLQI staff share the preliminary data and results from the review. Just like the CFSR, the CPR captures both strengths and challenges in field practice. In order to facilitate continuous quality improvement and address specific areas of improvement identified in each district office, BOLQI assists the supervisors with the development of the Practice Improvement Initiative (PII). Administration from both divisions works with District Office staff to support the PII efforts and monitor improvement initiatives.

New Hampshire has a well-established Quality Assurance (QA) process utilized during the CPR's that includes BOLQI staff and CPS/JJS Field Administrators. The CPR QA process also incorporates a practice component whereby a CPS and JJS Field Administrator reviews the completed OSRI for each of their respective cases to identify practice issues and trends that will require further attention by the Supervisors and may be utilized to help inform the Practice Improvement Initiative (PII).

In an effort to standardize quality assurance DCYF received technical assistance at the most recent case practice review in the Berlin District Office. Consultation was provided to the BOLQI staff and Field Administrators that perform quality assurance. Specific recommendations were made to strengthen the QA process and strategically provide training and support to reviewers to ensure thorough and accurate completion of the review tool. In addition, QA training has been scheduled in August to develop a core team of QA staff with specialized expertise to enhance the QA process. BOLQI will incorporate the recommendations into the existing framework for future case practice reviews.

The PII is a substantive change to New Hampshire's previous quality improvement process. The design for the PIIs flows from themes developed in the agency Practice Model, and creates a process for organizational change that parallels the process used with families. The PII process draws upon several methodologies and philosophies already in use within the agency, including Appreciative Inquiry, and the Breakthrough Series PDSA (Plan, Do, Study, Act) model, to create a design model that values and includes staff at all levels, parents, youth, providers, and community partners in developing plans with the District Offices for improved outcomes.

Following the Case Practice Review, Quality Improvement staff meet with the district office CPS and JJS staff to discuss and analyze the review results, and begin to design the PII process. The design of this process is customized for each district office based upon its size, dynamics, and result of the review, within the overarching AI/PDSA framework. The CPR results are explored with the PII group and ideas for change are generated through a focus on the strengths and successes of the office.

New Hampshire also engages a variety of internal team review processes at both local and state levels. The reviews typically focus on specific practice areas and cases, and include Permanency Planning Teams, Assessment Review Teams, and Critical Case Reviews.

Special Investigations/Provider Quality Improvement

The Special Investigations (SI) function remains based at state office with one CPSW that investigates all reports of abuse and neglect within the context of a foster home or residential group home placement.

During SFY 2012, Special Investigations was moved into the Bureau of Organizational Learning and Quality Improvement (BOLQI) in order to further enhance the link between these investigations of foster and residential care providers with the agency's overall quality improvement efforts. The SI worker must investigate assigned assessments of alleged child abuse and neglect occurring in out-of-home placements, determine the child's immediate safety needs, determine ongoing risk of maltreatment, and coordinate services to secure the child's safety. Once safety is achieved, SI will then make recommendations for quality assurance for that child or for overall program improvements such as any training that would foster quality care for children.

Other program enhancements during SFY 2012 include the creation of a quarterly Special Investigations management report that provides data regarding workload, response timeliness, reports aggregated by facility or foster care agency, and allegation types. This report will support the quality and management of the Special Investigations process itself, as well as inform external quality improvement efforts with providers.

Additionally, a revision of Special Investigations policy has begun, including policies related to Central Intake, Investigations in Foster Homes and Residential Care Facilities. The policy revisions will provide clarity around issues of screening and response timeliness.

When investigating an allegation of maltreatment of a child in a residential care facility or foster home a determination will be made about whether the allegation requires a CPSW, law enforcement, or licensing response. The Special Investigations CPSW works closely with State Licensing and Certification units. If, during the course of the assessment, a licensing or certification violation is discovered, SI will report and work with the Licensing or Certification units to provide them with any pertinent information or observations. These units are made aware of any report that is sent to SI and is kept informed of the outcome of the assessment, including any recommendations made by SI to that foster home or residential facility. Regular meetings are scheduled with the Special Investigations CPSW and Licensing and Certification staff in order to ensure this communication.

SI also works cooperatively with the Attorney General's office that is responsible for conducting protective investigations for all the state-run facilities including the Sununu Youth Services Center (SYSC). SI is responsible for providing direct assistance and information to the Attorney General's office in reports involving these facilities. The Attorney General's office makes the final determination as to whether or not abuse and/or neglect occurred and what action will be taken as a result. As with any facility, recommendations for quality improvement may arise from the investigation, even in instances where abuse or neglect is not substantiated. The organizational link between SI and BOLQI now allows such recommendations to be directly communicated to SYSC management, and management is able to be supported through BOLQI with any policy, data, training, or quality assurance activities that may be needed as a result.

Using Data to Assess Outcomes

DCYF continues to make use of the NCANDS and AFCARS data as well as the State Data Profile and internal reports to assess and monitor progress toward outcomes. Additionally, DCYF relies on a subscription to the Foster Care Data Archive (FCDA) provided by Chapin Hall for the analysis of program outcomes. As of October 2011 New Hampshire's FCDA was expanded to include juvenile justice data as well.

Additionally, New Hampshire is moving toward methods of integrating data even more closely into daily practice, enhancing the capacity of staff at every level to use data to drive both practice and administrative decisions. Casey Family Programs has entered into an agreement with the University of Kansas to develop Result Oriented Management (ROM) for New Hampshire DCYF. ROM Reports is an easy to use web-based reporting application that is being offered to child welfare agencies across the country. The software provides a simple and inexpensive way to access data – a vital component of ROM. ROM Reports is designed to provide access to current data on CFSR federal outcomes and a wide range of other important performance measures and indicators. These reports will be accessible by CPS and JJS field staff on their desktop each day, and will provide real-time information that will influence their daily practice. ROM Reports is a well-tested system that was developed by the University of Kansas and is being used in nine states.

DCYF is continuing to produce and distribute a Data Book, which includes trend data over the last five years, to all bureau administrators. The intention is to further this effort and add JJS data as well as distribute the Data Book to District Office Supervisors in order to assist them in making informed decisions. This will ensure availability, consistency, and accuracy of data at all levels of management.

The agency also continuously explores the possibility of partnerships with the University System to identify research to practice opportunities. This builds upon established partnerships within the Center for Professional Excellence at University of New Hampshire (UNH), and expands relationships to other departments and faculty such as the Carsey Institute.

BOLQI is currently collaborating with faculty from the University of New Hampshire and the University of Louisville on developing the Practice Model (PM) Evaluation plan, which is critical in ensuring monitoring and evaluation of Practice Model progress. This project is intended to evaluate outcomes that the state put forth as a desired target for the Practice Model, as well as inform management whether the outcomes are being reached in order to potentially formulate corrective actions.

In addition, BOLQI is partnering with the Plymouth State University (PSU) in two areas. The first is the GIS (Geographic Information Systems) Foster Care Project. It is the intention of this project to use DCYF's data, GIS mapping and analysis capabilities and the expertise and resources of Plymouth State University's Social Work and Geography Departments to assess statewide strengths and needs of the Foster Care System. DCYF is committed to employing project findings as a way to inform and improve the system of care for children in care, birth parents, foster parents, and other collaterals. DCYF is intending to use the findings in several specific ways to address questions voiced by constituents such as: ability to identify the most

appropriate foster home in a timely manner, maintain current information on resources, minimize both distance and transportation issues experienced in accessing resources, avoid youth placement in settings requiring school changes, and address various contextual components related to care.

Furthermore, in 2011 PSU faculty with expertise in the area of Program Evaluation conducted a free workshop for agency specialists and administrators on "The Basics of Program Evaluation", which included an introduction to evaluation and overview of various evaluation approaches, discussion around how to find the right fit for the evaluation project, and developing and using Logic Models. BOLQI is currently working with the same faculty on developing a series of trainings around Program Evaluation.

In addition, BOLQI is collaborating with the Director of the New Hampshire Department of Corrections Office of Research and Planning on the *Juvenile Justice Recidivism Study*. Recidivism is one of the critical measures of delinquency prevention, and a critical outcome for DCYF. The agency strives to rehabilitate young offenders and prevent future crime. The study looks at recidivism within the Juvenile Justice system as well as at youth who have left SYSC, and identifies whether they recidivated in the adult correctional system (arrests, referrals to court, conviction/adjudication, or incarceration/confinement).

DCYF believes that data are vital to the agency's successful operation and Continuous Quality Improvement process and must be carefully managed. In early 2012 DCYF implemented a formal data policy in order to ensure that all DCYF data are managed as institutional assets for fulfilling DCYF's mission of serving children, youth and families. To accomplish this, this policy guides the actions that each staff member follows when working with data.

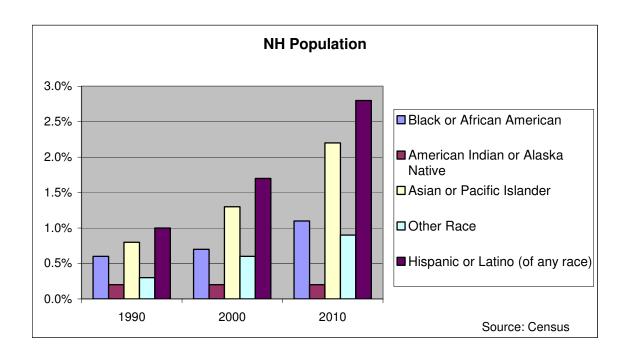
Finally, both the DCYF Bureau of Administrative Services – Fiscal Unit, as well as the BOLQI are in the process of implementing performance-based contracting for service and training providers. Contracts now include requirements for measuring case outcomes in residential, home-based, and preventative services. As data is gathered from on-site visits, the Data Managers group will be reviewing results and making recommendations to agency administrators and program area leaders.

Cultural Competency

Over the last several years, DCYF has engaged in an ongoing detailed analysis of census data to ascertain whether disproportionality is an issue across the state or within a specific regional area. During this period, the numbers of minority residents have remained too low to determine if disproportionality indicators are statistically significant.

However, as 2010 census results demonstrate (please see the table and graph below) the state grew slightly more racially diverse over the last decade. DCYF will be further exploring this issue using the new available data. In addition, since staffing for JJS and CPS data analysis is now joined under BOLQI, there is an opportunity to compare data systems and determine if disproportionality is a concern for New Hampshire, especially within the two largest cities of Manchester and Nashua.

| | 1990 | | 2000 | | 2010 | |
|----------------------------------|-----------|-------|-----------|-------|-----------|-------|
| | # | % | # | % | # | % |
| Total Population | 1,109,252 | | 1,235,786 | | 1,316,470 | |
| White | 1,087,067 | 98.0% | 1,186,355 | 96.0% | 1,236,165 | 93.9% |
| Black or African American | 6,656 | 0.6% | 8,651 | 0.7% | 14,481 | 1.1% |
| American Indian or Alaska Native | 2,219 | 0.2% | 2,472 | 0.2% | 2,633 | 0.2% |
| Asian or Pacific Islander | 8,874 | 0.8% | 16,065 | 1.3% | 28,962 | 2.2% |
| Other Race | 3,328 | 0.3% | 7,415 | 0.6% | 11,848 | 0.9% |
| Hispanic or Latino (of any race) | 11,093 | 1.0% | 21,008 | 1.7% | 36,861 | 2.8% |



POLICY

The former Policy and Rules Unit was assigned to the Bureau of Organizational Learning and Quality Improvement (BOLQI) last fall in order to enhance quality improvements throughout the division. A new staff member was added to support the merger of child protection and juvenile services agencies and policies. The Policy Team is still responsible for coordinating the development of all agency policies, (including policies at the Sununu Youth Services Center) administrative rules, forms (both electronic and print), and supporting the development of templates (such as the DCYF Case Plan), and the production and distribution of print materials such as resource guides, handbooks, posters, and brochures. The Policy Team also monitors and responds to changes in state and federal laws, e.g. the Child and Family Services Improvement and Innovation Act, and participates in the New Hampshire case practice reviews. Finally, a member of the Policy Team works with a Quality Improvement Team member to operate the Central Registry database of individuals found to have abused or neglected a child in their care.

Names in the Central Registry are maintained for seven years unless a court approves removal via an expungement process. The Central Registry is used to check the names of all applicants for childcare, foster care, DHHS employment, adoption, inter-state placements and individuals who voluntarily submit their own names, and as such serves a critical role in ensuring quality care for children and youth from the provider community.

Policy and rule development is typically a collaborative process involving CPSWs, JPPOs, SYSC staff, District Office Supervisors, stakeholders, State Office Administrators and Program Specialists with consultation, support, and review provided by the Policy Development Team. The Manager of the Policy Team also works collaboratively on the DCYF Title IV-E State Plan, the Health Services Plan, the Council on Organizational Learning, and the DCYF Disaster Plan.

CURRENT TRAINING SYSTEM FOR STAFF

DCYF believes that well-educated employees, caregivers and providers deliver higher quality, more efficient, effective, and proactive services to children and their families, which support the department's mission and guiding principles. As mentioned previously, through an array of contracts and targeted staffing, the BOLQI provides both long-term and short-term training options for both child protection and juvenile justice staff, foster and adoptive parents, relative caregivers, residential and system of care providers.

The BOLQI's annual training plan supports the goals set forth in the agency five-year Child and Family Services Plan and guides curriculum enhancements, training design, delivery and scheduling. In order to support cross-systems coordination and consultation, the staff, training partners, contractors, stakeholders, such as parents and youth, participate in a statewide training advisory council known as the Council on Organizational Learning (CoOL). One of their primary roles is to provide input into the development of the training plan to ensure content from various disciplines and knowledge bases is relevant to child and family services policies, programs and practices. The training plan is updated annually and evaluated by the administrator and DCYF director.

Training is required for both new and seasoned staff. Training opportunities increase employees' competence and morale through professional growth, development, and increased job effectiveness to ensure the safety, permanency and well-being of the children and families served. In addition to the regularly scheduled staff and provider trainings, an annual conference attracts an even broader audience for skill building, networking, celebration and recognition of peers and colleagues who have rendered outstanding service to New Hampshire children and families. This year a Post-Conference Institute is being planned for September 2012, funded through New Hampshire Practice Model resources, where the focus will be spotlighting the restorative justice practices. Staff will be brought together again to focus in depth on the implementation of restorative practices in the secure facility using a training of trainer model approach, initially with facility staff as an approach to building experts, and then to child protection, and juvenile justice field staff tentatively beginning in the fall of 2013.

In addition, Dr. Dana Christensen of Louisville, Kentucky, will continue during 2012 to provide the opportunity for JJS Supervisors, key community stakeholders, and leadership to learn more

about the ways in which Solution-Based Casework can enhance family engagement and partnerships and better measure progress in safety related skill acquisition. This opportunity is inclusive of coaching and technical assistance around skill building for key staff.

Child Protection and Juvenile Justice Workers continue to train together with birth parents in facilitating ongoing **Better Together with Birth Parents** trainings as well as ongoing participation in Core and Specialized trainings adding their "voice" to training.

Training Goals and Objectives

Over the last year, DCYF has continued to move through its plan toward professional excellence in training and organizational development. The BOLQI has moved the training system toward integrating and aligning all activities in order to leverage training as a cross-systems change and sustainability model. This integrated system, which moves beyond competencies, is based on four core principles: Accessible, Needs Based, Outcomes Focused and Local. Further, the training system will ensure support for the agency's primary goal within the Child and Family Services Plan, developing a Practice Model, by providing staff and organizational development activities that are inclusive of the entire agency workforce and stakeholders. Since the agency's first step in 2010 in the establishment of the Center for Professional Excellence in Child Welfare (CPE) with the University of New Hampshire, the agency has now included juvenile justice field and secure facility staff as participants in training within this model. Additionally, our contract with the Education & Training Partnership through Granite State College delivers training and support services to foster and adoptive parents, relative caregivers, key staff, and providers with some contractual enhancements and modifications. The partnership with Court Appointed Special Advocates (CASA) around training also continues, and ensures that training for these critical partners in case practice have access to quality training that is coordinated with the division and takes full advantage of resource sharing.

Over the course of this last year DCYF has established a learning framework within the training contracts leveraging our relationships with institutions of higher education with a two-pronged approach toward a cost benefit analysis (Return on Investment or ROI) for the overall trainings being delivered. The first approach involves the contracts for training services being delivered, which now includes a cost analysis that began in July 2011. The second approach was to take an internal look at the costs per training. Reports indicate a decreased per person staff training cost from SFY 2010 to SFY 2012 by 47% while the quality satisfaction rating for staff training in SFY 2011 was 98% for trainers and 96% for workshops. With contracts in place to report data on this model, the divisiob can begin discussions to track costs on a quarterly basis.

In support of BOLQI transition with the CFSP goals, a request for Technical Assistance was sought and approved in the spring of 2009. The National Resource Center for Organizational Improvement was identified as the best resource and with their assistance Child Protection and Juvenile Justice conducted a system wide assessment to determine the status of training services. Four comprehensive surveys were sent out to internal stakeholders across the training system. Results of the training system surveys were analyzed and used to establish goals related to training for the CFSP.

The three primary training related goals and progress towards those goals are described in the chart below:

Annual Progress Towards Goals:

| Goals | Objectives | Tasks | Progress |
|---------------------------|---|---|---|
| #1 Implement a | Objective 1: Establish a | Objective 1: Task 1: | Objective 1: (Completed) |
| Wholly integrated | joint DCYF/DJJS | Determine the clarity of | The BOLQI worked with |
| "System of Training and | Training Steering | Training Steering | training partners, |
| Organizational | Committee that includes | Committee membership | stakeholders, parents and |
| Development" which | participation of all | roles, and responsibilities. | youth from across the state to |
| supports the agency's | training partners, | Task 2: Develop a new | establish the Council on |
| practice model, uses the | including staff, youth, | bureau vision and mission | Organizational Learning |
| four core training | parent, caregivers and | statement, as well as | CoOL. This included |
| principles and a change | providers from across the | principles for training and | creating a Charter that sets |
| model perspective in | service system. | organizational | forth the CoOL vision, |
| training and development. | | development and use to | mission, values and |
| | Objective 2: Conduct | guide all BOLQI | principles, which will guide |
| | regular, multi-level | activities. | training and organizational |
| | training needs | | development. Five sub- |
| | assessments that ensure | Objective 2: Task 1: | committees were established |
| | the recruitment, retention | Analyze baseline data | including: |
| | and professional | from Training Assessment | 1) Curriculum |
| | development of all agency | Surveys | 2) Needs Assessment |
| | staff, caregivers and | Task 2: Determine future | 3) Technology |
| | providers, and supports | system and needs | 4) Evaluation |
| | sustainable systemic | assessment strategies | 5) Trainers |
| | change. | Task 3: Plan, implement | Additionally, the Practice |
| | Objective 3. Destroy with | and evaluate an ongoing, | Model Training Workgroup, |
| | Objective 3: Partner with intra and inter-agency | comprehensive needs assessment methodology. | formerly advising the Practice Model training |
| | stakeholders, including | Task 4: Participate in | strategies, has been melded |
| | the community, in the | Workforce Development | into the CoOL. |
| | Practice Model | activities that support the | Objective 2: (Tasks 1 & 2 |
| | development, | recruitment, retention and | Completed/Ongoing, Task |
| | establishment, | growth of all employees. | 3 In Progress/Ongoing – |
| | implementation and | growin or an emproyees. | Each of the training |
| | evaluation and ensure | Objective 3: Task 1: | contractors has participated |
| | training aligns with shifts | Provide leadership, | in the CoOL as well as the |
| | in the agencies' approach | coordination, and | Needs Assessment sub- |
| | to practice. | organizational | committee. Each of the |
| | 1 | development support to | training partners has |
| | Objective 4: Develop a | the Practice Model effort. | reassessed and enhanced |
| | plan for the enhanced use | Task 2: Lead the selection | their needs assessment |
| | of technology in practice | of an organizational | methodologies; including |
| | and training. | development strategy and | expansion of both |
| | | train all staff and | organizational/system needs |
| | | stakeholders. | assessment and looking |
| | | Task 3: Establish and | towards new ways to assess |
| | | oversee training | individualized training needs |
| | | curriculum leadership | for caregivers. Training |
| | | committees in the areas of | partners have also met with |
| | | Family Engagement, | Practice Model leads and |
| | | Assessment, Permanency | CoOL representatives to |

and Adolescents to guide future curriculum design, development and implementation.

Objective 4: Task 1: Develop a Learning Management System and mixed eLearning methods. Task 2: Determine necessary supports and training for staff' ability to function efficiently and

effectively in virtual work

environments.

assist in facilitating ongoing sustained delivery of practice model trainings in existing Core curriculum and stand along curriculum delivered to staff and caregivers. Task 4 (Completed/Ongoing) The BOLQI and Business **Operations Administrators** continue to co-chair the agency Workforce Development Committee (WFD). Five new staff members have been recruited onto the committee, including a JPPO, to support expanded workforce activities related to the Practice Model. A Recruitment, Retention and Development plan was created and adopted by the WFD in FY 2011. This includes updating of the Structured Hiring Process, revisions to the Exit Survey process, and expansion of staff recognition activities. The New Hampshire Realistic Job Preview (RJP) for CPSWs was successfully released in fall 2010 and is now required preview for all new hires. Data linking the RJP to staff hiring and retention is being collected and analyzed via an expert affiliated with the CPE. Staff in two district offices are now working in a virtual work environment and training and technology support has been provided to them, as well as ongoing surveying to determine job satisfaction and impact on services.

Objective 3: Task 1
Completed/Ongoing, Task 2 and 3, In-Progress)
BOLQI staff, along with
Practice Model consultants,
chair the Practice Model
Training Workgroup
(PMTW). The PMTW is

| | T | T | 1 0 00 1 |
|---------------------------|----------------------------------|--|---|
| | | | made up of staff and agency |
| | | | partners and is responsible |
| | | | for leading practice model |
| | | | training efforts including |
| | | | training all staff in Practice |
| | | | Model Beliefs and |
| | | | Principles, collaborating with |
| | | | training contract partners to |
| | | | revise core training for new |
| | | | staff and supervisors, |
| | | | caregivers and providers to |
| | | | align with the Practice Model Beliefs and Principles. |
| | | | Training on the first |
| | | | enhanced family engagement |
| | | | strategy, the FAIR model (to |
| | | | replace the previous ACR |
| | | | process) took place in |
| | | | January 2011, which |
| | | | included all field staff and |
| | | | supervisors. Training for |
| | | | staff on Solution-Based |
| | | | Casework occurred |
| | | | throughout SFY 2012 with |
| | | | CPS and Juvenile Justice |
| | | | field staff, New Hampshire's |
| | | | version of Family Team |
| | | | Conferencing now called |
| | | | Solution Based Family |
| | | | Meetings is planned for the |
| | | | fall of 2012, training of the |
| | | | Integrated Assessment model |
| | | | (that includes SDM and Solution Based Casework) |
| | | | will also begin in the fall of |
| | | | 2012 |
| #2: Enhance | Objective 1: Implement | Objective. 1: Task 1: | Objective 1: (Tasks 1 |
| linkages between training | Kirkpatrick's Four Level | Determine what levels of | Completed, Task 2 In- |
| and organizational | Model of Evaluation ¹ | evaluation are currently | Progress, Task 3 In |
| outcomes by expanding | across all training | being utilized | Progress) As part of the |
| training evaluation | programs. | Task 2: Develop a plan to | CoOL an evaluation sub- |
| methodologies. | | implement all levels of | committee was established. |
| _ | Objective 2: Conduct | evaluation | This committee completed |
| | ongoing assessment of | Task 3: Evaluate training | the mapping evaluative |
| | training as a systemic | programs' impact on | activities across all training |
| | factor in achieving | agency outcomes | contracts in relation to |
| | organizational outcomes. | | Kirkpatrick's four-levels of |
| | | Objective: Task 1: | evaluation. After review of |
| | | Participate regularly in | this information, it was |
| | | agency Case Practice | determined that a request for |
| | | Reviews | Technical Assistance to |
| i | | Tack 2. Dayolan and | aggiet CoOI is this Objective |
| | | Task 2: Develop and implement training | assist CoOL is this Objective would be needed. The |

¹Noe, R.A. (2008). Employee Training & Development (4th Edition), McGraw-Hill Irwin. Boston.

| | T | T | 7 |
|---|---|--|---|
| | | assessment tools to be used during Case Practice Reviews. Task 3: Analyze CPR/CFSR data as it relates to training needs Task 4: Design and implement a method for training development that aligns with the local or statewide results of the case practice review Task 5: Support DJJS efforts to obtain best practice standards in juvenile justice work. | Technical Assistance request was approved and began 6/24/2011. Linkages with national evaluation expert Anita Barbee to each training contract have been made and deliverables being completed as part of the quarterly meetings of CoOL with new evaluation tools at the next level in Kirkpatrick's evaluation model. Objective 2: (Task 1, 2, 3, 4 Completed/Ongoing, Task 5 Completed/Ongoing) In SFY 2011, two Case Practice Reviews were conducted. BOLQI staff led the CPR process and the design and implementation of the subsequent PII. Training needs are identified as part of the PII process and are aligned with the Practice Model and PIP focus areas. Beginning in SFY 2012, staff from Training Contract Partners will participate in the Case Practice Reviews and have responsibility for implementing follow-up |
| #3. Ensure training | Objective 1. Document | Objective A. Task 1: | trainings. Objective 1: (Completed) |
| #3: Ensure training resources are used efficiently and effectively. | Objective 1: Document and track all costs associated with training. Objective 2: Develop decision-making criteria for training investment utilizing the Practice Model as the "touchstone". Objective 3: Design, implement and evaluate a Return on Investment Model (ROI) for training. Objective 4: Design and implement performance-based contracts, cooperative and learning agreements that enhance the impact of DCYF/DJJS training system resources on outcomes for children and families: | Objective 4: Task 1: Finalize training contract with New Hampshire CASA Task 2: Establish a learning framework with institutions of higher education for student internships and placements, including expectations, roles, responsibilities and cost/benefit analysis (Return on Investment or ROI) | Objective 1: (Completed) Contracts with training providers have been updated to include a requirement for documenting tracking all costs associated with training related services. Assessment and analysis of data will begin in SFY 2011. Initial review of data has guided realignment of training contract priorities and logistics. Training delivery units have been realigned in a more cost effective way, in sync with organizational priorities such as the PIP and Practice Model. Objective 2: (Completed) Upon approval of the PIP, the training system will |

| T_ | | |
|-----|----------------------------------|------------------------------------|
| | <i>Task 1:</i> Finalize training | finalize alignment of training |
| | ontract with New | priorities. |
| H | Iampshire CASA | |
| Ta | 'ask 2: Establish a | Objective 3: (In Progress) A |
| le | earning framework with | team of DCYF/DJJS fiscal |
| in | nstitutions of higher | and training contract partners |
| ed | ducation for student | have continued to identify |
| lin | nternships and | elements of an ROI Model |
| | lacements, including | with the intention to link ROI |
| | xpectations, roles, | analysis to the Practice |
| | esponsibilities and | Model. Initial Data from the |
| | ost/benefit analysis | |
| | ood official analysis | training contracts indicates |
| | | an increase in the types |
| | | trainings offered and the |
| | | number of hours provided |
| | | with a decrease in the |
| | | individual and per hour costs |
| | | overall. |
| | | |
| | | Objective 4: (Task 1 |
| | | completed – Task 2 |
| | | completed) A contract with |
| | | CASA New Hampshire was |
| | | implemented in August |
| | | 2009. Significant |
| | | enhancements were made to |
| | | partnership agreements with |
| | | institutions of higher |
| | | education. A cost/benefit |
| | | analysis was completed in |
| | | SFY2011. This information |
| | | was used to redesign the RFP |
| | | and contracts for training |
| | | services to be implemented |
| | | in SFY 2012. |
| | | 111 01 1 2012. |

Long-term Training

Through DCYF's, Education Tuition Partnership (ETP), with the Departments of Social Work at two University System of New Hampshire Schools, Plymouth State University and the University of New Hampshire, DCYF supports up to eight current and/or potential employees to obtain a Bachelor of Social Work (BSW) degree or a Masters Degree in Social Work (MSW) for one to two years of their college education. Participants are selected through a competitive screening process.

Students selected for the ETP receive in-state tuition and fees, as well as stipend for books and incidentals related to their education. This monetary contribution toward education is paid back through required work commitment with DCYF of two to four years. The ETP programs conduct annual program evaluations that report on both process and outcome measures. Information gathered includes, student progress, student satisfaction with coursework, a survey of participants and program stakeholders regarding program improvement opportunities.

Additionally, a second component of the annual evaluation assesses gains in program participant knowledge in child welfare.

The Bachelor of Social Work programs prepare students for general social work practice with a specialty focus in child welfare. Social work theory, knowledge, values and skills are taught through classroom and field experiences including a placement within a DCYF District Office setting. MSW students select child welfare as their area of specialization and may choose to pursue direct or macro practice and complete one-year of placement within a DCYF District Office or at the State Office. In both the BSW and MSW programs, students are expected to take specific courses related to a specialization in child welfare practice including; Child Maltreatment, Child Welfare and Family Services (Policies, Programs and Practices), and/or Families, Schools and Communities. Additionally, electives are offered in areas such as, child development, family dynamics, domestic violence, substance abuse, and mental illness. Over the last year, DCYF and both the University of New Hampshire and Plymouth State University have successfully supported students in attending Core, Related and Specialized training during the course of their student placements with the agency that has prepared them more effectively for employment with the agency. Plymouth State University and DCYF also determined that it was in the best interests of students, and both organizations, to pre-establish a single district office as the only practicum site for students in the BSW program. This has reduced recruiting, interviewing and on the job training time for DCYF and has enhanced the partnership relationship between the ETP Program Director at Plymouth State University and the district office supervisory staff. Finally, establishment of the Center for Professional Excellence in Child Welfare at the University of New Hampshire has enhanced the connection between research, practice and preparation of future child welfare professionals. This connection has been strengthened in several ways; including conducting research on the connection between the Realistic Job Preview, recruiting and retention (as described in the table above), bringing more non-Title IV-E students into the agency for internships, and involving faculty in curriculum design and delivery.

Short-Term Training

The short-term training program for staff includes classroom, on-the-job, and online training for new child protection and juvenile justice employees, Core Academy, and related trainings. These courses are all required within one year of employment and prior to assignment of a full caseload and independent work.

Pre-service training

All new CPS and JJS employees are "oriented" to their jobs in two primary ways. First, a broad organizational overview is provided through the Department of Health and Human Services (DHHS) in a one-day orientation. Each agency then provides more intensive job-specific training to new employees. All staff receive a one-day condensed agency orientation. This day is initiated by a welcome and presentation from the agency director who sets the tone for new staff regarding the agency vision, mission, values and principles that drive practice. Next, each of the agency bureau administrators presents an overview of their bureau's role in striving towards the outcomes of safety, permanency and well-being and their connection with the

agencies' practice model. The intent is to create a comprehensive and integrated picture of the organization for each new employee and develop connections for staff within and across the division.

Once JPPOs complete DHHS orientation and the DCYF one-day condensed agency orientation, they transition immediately into the DJJS Professional Foundation Curriculum Academy, a 150-hour training curriculum, or the Field Training Services Program (FTSP), depending upon their hire date. The academy is delivered on-site at the Sununu Youth Services Center in Manchester, New Hampshire.

Upon entering the FTSP, JJS staff are matched and mentored by an experienced JPPO or JPPO Coordinator. The purpose of the FTSP is to ensure transfer of knowledge from the Academy and to support standardized field operations. FTSP curriculum includes topics such as safety awareness, legal mandates, court hearings and procedures, connections between child protection and juvenile justice, permanency planning, and professional behavior in the workplace. All JPPOs must complete the JJS Professional Foundation Curriculum and the FTSP prior to being assigned a caseload or acting independently. All new JJS employees also participate in the Juvenile Justice Mentoring Program. In this program a new Juvenile Probation and Parole Officer (JPPO) is assigned to a seasoned JPPO for overall guidance and assistance completing a mentoring log. The goals of mentoring are to familiarize the new employee with good case management skills, procedures, policies, best practice and the culture of the agency. All JJS preservice training including Orientation, Academy, FTSP and Mentoring are currently funded through non-Title IV-E state and federal sources such as Office of Juvenile Justice and Delinquency Prevention (OJJDP). These learning opportunities have been described above in order to set a context for the professional development continuum for juvenile justice staff.

All new DCYF CPSWs must complete the Core Academy (120 hours), as well as sixteen additional (one day and half day) related trainings within their first year of employment. One of the enhancements to the Core Academy now includes the Better Together with Birth Parents as a component to the Family Engagement portion of the training. The Core Academy and Related trainings are offered two to three times per fiscal year at the BOLQI centralized location in Concord, depending upon the hiring needs of the division. All new CPSWs are assigned as "secondary" workers on a reduced caseload (no more than four cases) during the pre-service training period. The intent is for new staff to transfer their learning, i.e. new skills, knowledge, abilities and competencies, into their workload under the guidance of their supervisor, mentor and peers in a controlled environment.

Several supports are provided to CPSWs during the pre-service training period. These include reading and skills tracking tools, collegial, supervisory and logistical support. A Core Academy Learning Workbook is provided to all new staff. Their mentor and supervisor review the workbook in detail with new CPSWs before, during, and after training. New CPSWs are required to complete all elements of the Core Academy Learning Workbook prior to graduating from Core and being eligible to receive a full caseload, typically within four months of hiring. Ensuring strategic placement of the number of days out of the office for training and in the office for application of learning that a new CPSW attends classes provides an additional support.

Bureau staff closely monitors employee training compliance and completion of the core academy.

The focus of the CPSW Core Academy curriculum is on safety, permanency and well-being. Subject matter is arranged sequentially to build a logical progression of information sharing and skill-building as one completes the academy. Trainers for both Core Academy and Core Related trainings come from the cadre of certified trainers the BOLQI maintains through its contractual partnerships with CPE or other training system partners. DCYF has provided a stand-alone document with specific details regarding training courses, syllabi, Title IV-E functions, durations, cost allocation, and audience. Over the last year, a major emphasis has been to integrate the Practice Model Beliefs and Principles into Core Competencies and Curriculum. The Practice Model Training Workgroup led this effort with the CPE as its partner. Competencies were revised over this last year with a 2012 target for completed curriculum revision that reflects the New Hampshire Practice Model and includes youth and parent voice. New related trainings going forward will include curriculum on Solution-Based Casework and Solution-Based Family Meetings as a part of the Practice Model's solution focused theory.

Mentoring is also a critical support provided to staff during their first year. All new CPSWs are matched with a certified mentor who is at least a CPSW II, with more than one year of experience, and is typically located within the same district office. The mentoring process includes the completion of a mentoring Log, which coincides with the Core Academy Learning Workbook and must be completed within the first year of employment, signed off by the CPSW, their mentor, supervisor and the BOLQI Administrator or designee. A copy of the mentoring log is maintained in the employees training file. Beginning in February 2011, an enhanced mentoring curriculum was designed and implemented to reflect the agency's emphasis on leadership support for mentoring, all staff responsibility in quality improvement, and the New Hampshire Practice Model Beliefs and Principles.

A new addition to the mentoring training now includes the Sununu Youth Services Center staff. Newly hired Youth Counselors are assigned to seasoned trained mentors within the facility and complete a mentoring log along with key facility trainings prior to the start of any independent work on any of the secure units.

In-service training

Each year an annual staff-training calendar is developed to meet the ongoing/advanced training needs of seasoned staff. The BOLQI uses aggregate data from Annual Individual Training Plans (CPS) or Annual Training Surveys (JJS) as a starting point to identify potential training needs statewide. Bureau staff and the JJS Professional Development Staff meet with individual district office teams and supervisors to ensure specific needs for ongoing/advanced training are accessible, needs based, locally delivered, and outcomes focused. DCYF staff that provide direct care to children and families are required to attend thirty hours of ongoing training annually, while JJS staff are required to attend forty hours. Non-direct care staff are required to attend twelve hours of training per year.

Each year JJS provides five cycles of twelve advanced trainings derived from the Annual Training Surveys. CPS offers at least twelve (seventy-two hours) ongoing/specialized trainings annually through contract and state partners for Division and other bureau staff. Over the last year, more than 100 hours of specialized training has been provided to seasoned CPS and other bureau staff on a wide variety of topics. Title IV-E funds are used to support a portion of ongoing (in-service) training activities for JJS. DCYF has provided a stand-alone document with specific details regarding JJS/CPS training courses, syllabi, Title IV-E functions, durations, cost allocation, and audience.

As noted previously, efforts continue to ensure staff are culturally competent and abide by Indian Child Welfare Act. Indian Child Welfare Act competencies are specifically addressed in Core Academy Module I and DCYF continues to partner with specific expert trainers for ongoing staff training and organizational consultation as needed. Through support from the Court Improvement Project, DCYF received the Indian Child Welfare Act Guidebooks, which are accessible to staff within each district office for continual reference as needed.

Seasoned staff may also be referred to attend Core Academy and related trainings as part of their professional development identified in their AITP, or as referred by their immediate supervisor. Additionally, staff has access to trainings outside the division provided by other state agencies, community and higher education partners across the state, regionally and nationally.

In May 2012, DCYF held their annual conference and had more than 360 staff, providers, caregivers and stakeholders in attendance. The conference theme was *From Principles to Practice: Changing the Sequence.* Many specialized workshops were presented with local, state, regional and national presenters including topics such as ethical dilemmas in supervision, children and youth in court, and a workshop on how infant meaning-making processes govern typical and pathological child outcomes.

Trainers for specialized topics and outside trainings for both child protection and juvenile justice staff can come from varying sources. Typically, trainers are either part of the cadre of certified trainers the BOLQI maintains through its contractual partnerships with CPE, E&TP or other training system partners, or they are local, state, or national experts in child protection or juvenile justice. Additionally, they may be subject matter experts in specifically requested topic areas.

All trainers are evaluated regularly by participant evaluations, monitoring via bureau research analysts and provided feedback by bureau program specialists. This information is utilized to maintain the certification of the current trainer pool against current standards. Training materials developed by BOLQI or contract partners are structured and designed for the adult learner. Trainers use their skills and knowledge to maximize learning. For example, training is highly interactive, allowing participants to practice their newly learned skills, receive feedback and gain confidence before they leave the classroom. Newly developed curriculum, such as being put together for Solution-Based Casework includes a certification process with a coaching component being included.

Supervisors within DCYF have access to numerous opportunities for supervisory training. Over the last several years, DCYF has held an intensive, in-depth supervisory training for supervisors

on a bi-annual basis. The program is based on the Institute for Human Services competency-based training curriculum. Training topics are derived from best practices in the field of child welfare management, enhanced performance based standards, and leadership science. The goal of this training is to equip District Office Supervisors with the management, clinical and case practice knowledge needed to guide their staff to consistently support the vision, mission, guiding principles, and goals of the agency through best practices. This supervisory core was delivered to child protection supervisors in September of 2011 and to Juvenile Justice Supervisors in January of 2012.

DCYF Supervisors also have access to the New Hampshire DHHS Organization Development and Training Services Certified Public Supervisors program. This program trains supervisors in agency specific human resource policies and procedures, supervision techniques, effective communication and facilitation of workplace issues. Finally, four Child Protection and Juvenile Justice mid-level supervisor/managers attended the National Child Welfare Workforce Institute (NCWWI) Leadership Academy for Middle Managers (LAMM) training in August 2011.

DCYF continues to operate and maintain a fully compliant Statewide Automated Child Welfare Information System known as Bridges. A module for coordinating training and maintaining records in order to support training compliance was designed and implemented within Bridges in 2006. The BOLQI collaborates with the agency's Bureau of Information Systems Training to enhance and maintain the training module on an ongoing basis. In September 2010, an upgrade to the Bridges system provided improvements in the training module that have enhanced staff' ability to track their annual training information more effectively. Further enhancements are scheduled to occur in June of 2012 in incorporate JJS staff into this learning system. All DCYF staff training is scheduled, advertised and tracked through the Bridges Information System; however, as of January 2010, the CPE has operated a web site for staff related to training and has begun to build the components of a comprehensive Learning Management System www.unh.edu/cpe. Staff and supervisors can still access and monitor their own training records and register for internal agency trainings via Bridges. The CPE training liaisons continue to work with the district offices to manage their own Blackboard learning sites where training/learning related information can be posted and viewed by staff. CPE Training Liaisons assigned to each district office assist staff and supervisors in ensuring Annual Individual Training Plans are completed, aligned with required competencies, and completed in a timely manner. Liaisons also ensure that staff are aware of all training resources and are thus able to plan in advance which trainings they would like to access in order to support their individual professional growth.

CURRENT TRAINING FOR FOSTER/ADOPTIVE PARENTS, RELATIVE CAREGIVERS, AND RESIDENTIAL CARE PROVIDERS

The Education and Training Partnership provides training to foster and adoptive parents, relative care givers and residential care providers. The mission of this partnership is:

To enhance the quality of care for children living outside of their own homes by providing the knowledge, skills, ability and mutual support necessary to address the daily issues that confront substitute caregivers and case managers who work with children and

youth in placement. In support of this goal, the Education and Training Partnership provides competency based training, statewide, to foster/adoptive parents, kin caregivers, DCYF staff, and residential care providers working with children in placement due to abuse/neglect.

DCYF staff is encouraged to join caregivers in training as a matter of best practice, and to promote collaborative relationships between social workers, juvenile probation and parole officers and caregivers. The E&TP partners with DCYF in assessing training as it relates to the principles of accessibility, needs based, outcomes oriented and local, and in DCYF's intention to establish a Practice Model of Excellence. The E&TP Director and selected program staff are members of the CoOL and participate as co-leaders in all of the CoOL sub-committees. This has supported efforts to better align the continuity of training for staff, caregivers and providers.

Pre-service training

The training program for both foster and adoptive parents is known as Foster and Adoptive Care EssentialS (FACES). This training is available to individuals interested in providing foster/adoptive care and consists of twenty one hours of training that promotes a better understanding of working with children, families and child-placing agencies connected with DCYF. This training assists in preparing individuals to be skilled caregivers and professional team members. Foster and adoptive parents who have been recruited and trained as instructors with Granite State College primarily instruct courses. This series of seven three-hour modules is delivered statewide and fulfills New Hampshire state training licensing requirements. Up to one hundred and eighty modules of training are provided each year. DCYF has provided a standalone document with specific details regarding training courses, syllabi, Title IV-E functions, durations, cost allocation, and audience. Over the course of SFY 2011 and continuing into SFY 2012, DCYF has been included in an intensive collaborative process with the Education & Training Partnership to update and revise the FACES curriculum based upon New Hampshire's Practice Model. Revision of Modules I and II of FACES were completed in January 2011. Revisions to the remaining five Modules continue to be enhanced and revised with an expected completion date of December 30, 2012.

Developed in 2005 and piloted in 2006, Residential Counselor Core Training (RCCT) is offered to residential care staff to support their work with children, youth in care and their families in any of New Hampshire's residential facilities. A thirty hour competency-based training series, RCCT provides generalized training that addresses the basic knowledge, skills and abilities essential to the position of residential counselor, regardless of the facility in which they are employed. DCYF has provided a stand-alone document with specific details regarding training courses, syllabi, Title IV-E functions, durations, cost allocation, and audience. Similar to the FACES revision process, DCYF and the Education & Training Partnership undertook an intensive process of updating and revising the RCCT curriculum based upon New Hampshire's Practice Model and the *Framework for Collaboration* initiative with Casey Family Programs. Updates and enhancements continue to occur as necessary. As New Hampshire's Practice Model continues to evolve, pre-service training for new caregivers and residential care providers will be continually assessed by the CoOL and the Education & Training Partnership.

In-service training

The Caregiver Ongoing Training (COT) is a program of over sixty competency-based courses designed in collaboration with DCYF staff, foster parents and residential childcare staff. The intent of the program is to provide the skills and mutual support necessary to address the daily issues confronting caregivers and case managers. Foster parents are required to have nine hours of ongoing training per year. The COT program is the primary vehicle for foster parents to meet this requirement. Classes are open to eligible caregivers, staff and providers, including relative caregivers, and are intended to provide the skills and mutual support necessary to address daily issues and the challenges of working with children in placement, and their families. Approximately 160 training courses are offered statewide in local communities each year in content areas such as: Adolescence, Behavior Management, Child Development, Communication, Education, Health, Neglect and Abuse, and Collaborating with Families and Providers. DCYF has provided a stand-alone document with specific details regarding training courses, syllabi, Title IV-E functions, durations, cost allocation, and audience. The Relatively Speaking Curriculum was delivered in an online workbook format to relative caregivers throughout the state with classes starting October 31, 2011. In all E&TP programs, both formal and informal training needs assessment is performed on a regular basis. Methods for assessing need include: surveys, focus group studies, participating at foster parent support group meetings and the Foster and Adoptive Parent Association, attending monthly DCYF foster care meetings and ongoing dialog with residential facilities.

New non-credit and college credit courses are developed in response to identified needs in collaboration with DCYF staff and stakeholders through a process that begins with: a rationale, guiding principles and the identification of desired learning outcomes. Subject matter experts are guided through the development and stakeholders review progress at regular intervals. Training design is grounded in adult learning theory. Revisions occur on a regular basis to reflect DCYF practice changes.

Delivery methods and duration are assessed and determined by the Curriculum Development Specialist in consultation with the Subject Matter Expert and stakeholders. Handouts and/or manuals used in each training session are also prepared by the E&TP.

The E&TP provides publicity and registration for the training sessions. Publicity includes: brochures, flyers, a catalog of courses, and web page updates that provide the registration function for all training programs and include the ability for caregivers, providers and staff to register on-line. Materials are distributed to approximately 750 licensed foster homes, 400 residential care workers, and over 600 DCYF staff, as well as to New Hampshire DHHS Division of Finance staff who then distribute to identified relative care providers.

Training is delivered in traditional classrooms, and community sites (approximately forty local community sites including GSC Centers, libraries, police/fire stations, hospitals, schools, community centers and residential facilities). All facilities are assessed for safety and ADA accessibility. Distance learning is also offered for specific courses and includes, workbooks, audio, and on-line modalities.

Instructors are community practitioners qualified to teach specific courses based on their resume, vitae, a personal interview, academic credentials, expertise, years of experience in their field, and philosophical compatibility with the DCYF. They are engaged in professional development through various venues including a newsletter publication called Partnership Press.

The E&TP has designed a system that promotes continuous quality improvement of course curriculum. It includes the quarterly analysis of significant quantitative and qualitative data elements, and class observation reports. An annual report representing a compilation of the data is presented to stakeholders. E&TP has been engaged as members of the CoOL in assessing, designing and implementing expansion of training evaluation capacity, particularly as it relates to linking training content to outcomes for children and families. Several courses now include "Knowledge Checks" as an additional means of assessing learning. Over the upcoming year, the E&TP is planning to design an Individualized Portfolio of Learning for foster parents. The goal is to increase individualized targeting of foster parent needs with training attendance, learning and improved outcomes for children, youth and families.

DCYF Speakers Bureau

The Speaker's Bureau is responsible for responding to community inquiries creating opportunities for greater awareness regarding the roles and responsibilities of DCYF. Goals for the Speaker's Bureau have been:

- To proactively offer speaking engagements to the community instead of reacting to community requests;
- To improve data collection of DCYF presentations given throughout the state;
- To provide training opportunities for speakers on public engagement and presentation skills to promote a positive image of DCYF; and
- To create a centralized resource library of materials, publications, and media presentations.

The Speakers Bureau is overseen by the BOLQI in conjunction with the Center for Professional Excellence in Child Welfare (CPE). The intention is to maintain a cohesive public image, consistent message, and improved public knowledge of DCYF/DJJS, including the education of mandated reporters, as well as education to the community at large (including parents) about family rights as a regular and consistent message. Other important elements include, information about key programs and utilizing media materials that "tell the story" and are identified with the agency as a whole. The Speaker's Bureau utilizes a "cookbook" of training materials that are centrally located, easily accessible, with an "ala carte" menu to address the unique needs of each audience and maintain up-to-date information about agency policies and practices. Information is tracked and data is processed regarding information requested, by whom, and delivered in what venue.

Workforce Development Committee

The BOLQI Administrator co-leads, with the DCYF Business Operations Administrator, the agency Workforce Development Committee (WFD). This committee is responsible to oversee agency recruitment, retention and development of staff. Activities targeted for 2010 - 2014 by the Workforce Development Committee included:

- Development of a Realistic Job Preview (RJP) for CPSW,
- Implementation of an Advanced Mentoring Program for seasoned staff, and
- Continued tracking of workforce recruitment and retention data in an effort to inform and evaluate ongoing development activities.

In the last year, the WFD has accomplished:

- Assessing the usage and effectiveness of the Realistic Job Preview (RJP) video;
- Updated Recruitment, Retention and Development Plan for 2011-2012;
- New members have been added to accurately represent the merging of Juvenile Justice Services and the Sununu Youth Services Center (second JPPO, Juvenile Probation and Parole Supervisor (JPPS), Youth Counselor from SYSC, Administrator from SYSC and another CPSW);
- Acted as the selection committee for awards for the DCYF Conference Committee;
- Incorporated the Practice Model Beliefs and Guiding Principles into the structured hiring process;
- Currently updating the Juvenile Justice Structured Hiring Process;
- Developed "Ideal Employee" Focus Groups to help inform the agency on how to recruit and retain the best employees; and
- Submitted an article to the Practice Model Newsletter to educate the agency of the role of the WFD Committee.

Future work for the WFD includes identifying clear recruitment and retention strategies as a result of the "Ideal Employee" Focus Groups, reviewing our agency's Internship Policy, finish updating the JJS and SYSC Structured Hiring Process and reconvene the Advanced Mentoring Program, when appropriate.

COSTS AND FUNDING STREAMS

In establishing our cost allocation methods the BOLQI and the DCYF Bureau of Fiscal Services examined the goals and objectives of each training program to match those goals and objectives to the various federal funding sources eligibility criteria. Criteria from Title IV-A, Title IV-B, Title IV-E, Medicaid, and Social Service Block Grant and Adoption Incentive funds were utilized to accomplish this.

The resulting cost allocation plan distributes the expenses between the above-mentioned Federal programs and State general funds based upon the benefiting programs. That is, if a training contract meets the Title IV-E criteria, DCYF applies the Title IV-E penetration rate and charges Title IV-E the appropriate amount. The agency then examines other benefiting Federal programs and distributes the remaining Federal portion between those programs based upon how much of that training program addressed that Federal funding source's criteria. If a particular training program does not meet any federal criteria those costs are allocated to 100% State general funds.

Based upon this cost allocation method, Title IV-B funds provided for approximately .023% of the total costs for DCYF/DJJS training initiatives during SFY 2011. SFY 2012 information is not yet available. Inclusive of all state and federal funds, including partner matches, the total estimated costs for training for SFY 2013 is \$2,579,906.

DISASTER PREPAREDNESS

DCYF continues to review its Disaster Response Plan (DRP) to identify emergency preparedness changes needed to be consistent with best practice at the state and national levels. DCYF is in the process of merging with the Division for Juvenile Justice Services (DJJS). DJJS includes Juvenile Justice Probation and Parole and the Sununu Youth Services Center (SYSC), which is a youth detention facility. It is anticipated that the plan will be revised and updated this year. Over the last year the division's work has focused on child care programs by working with Child Care and Resource agency staffs who prepare child care programs for potential disasters.

TABLETOP EXERCISES

Tabletop exercises will resume this year to include Juvenile Justice Supervisors as well as Child Protective Services (CPS) Supervisors. All CPS Offices have participated in tabletop exercises and included the following participants: a foster parent, the District Office Manager of Operations and CPS full and assistant supervisors. Future exercises may include representation from community providers, first responders, court representatives, law enforcement or parents of youth in care.

BRIDGES RECOVERY PLAN

Bridges is the DCYF Statewide Automated Child Welfare Information System that contains client records, billing and payment information, interfaces with other systems, etc. An obvious need is for a recovery plan should disaster strike to disable Bridges. A disaster recovery plan was developed with the Office of Information Technology that involved moving Bridges from one server to another server (over a weekend) to determine if the recovery plan was successful. The plan was successfully tested in 2008 and provides some confidence that Bridges can be successfully recovered if a disaster strikes.

CHILD CARE

The DCYF Child Development Bureau (CDB), Child Care Licensing Unit, New Hampshire Department of Safety Emergency Management, and the Child Care Resource and Referral Network have developed and disseminated two guides, "Child Care Center Emergency Preparedness Guide", and "Family Child Care Emergency Preparedness Guide". These guides are posted on the New Hampshire DHHS website and are used in trainings presented by Child Care Resource and Referral statewide. The Child Care Resource and Referral staff also provide technical assistance to child care providers to help them create their emergency plans, using the guides, which include the most recent information regarding the Incident Command System, addressing all types of hazards and responses. Developing these guides was the first phase of the division's work, and now ensures that all childcare programs can have written emergency plans, as well as practice implementing these plans.

Now in place is the Child Care Resource and Referral alert and response system for child care. The DCYF Operations Manager alerts DCYF staff to emergency situations as they occur across the state. The CDB Program Improvement Specialist notifies the Child Care Resource and Referral programs, targeting those in the affected area(s), and the Child Care Resource and Referral staff contact the child care programs and offers assistance.

Our current phase of work includes the development of a Strategic Plan for Recovery of Child Care after a disaster. The Strategic Plan will be developed and approved (target date: January of 2013) in collaboration with stakeholders and the DCYF Disaster Response Team. We are also planning regional exercises for pilot child care programs to practice mass evacuation and relocation to temporary sites.

FOSTER PARENTS' EMERGENCY INFORMATION

Information about foster parents is entered and stored in Bridges. It is now possible to enter foster parent re-location information on Bridges so staff may easily find the re-location address. This information is collected when new applicants complete their application and when current foster parents renew their license or update their demographics. The foster/adoptive parent handbook has been updated to include DRP information. Foster and Adoptive parents continue to participate in the local office desktop exercises. A sample of eleven foster parents in 2011 was asked about emergency plans for schools where their foster children attended. Most (seven out of eleven) did not have a copy of their school's emergency plan, which may indicate a need for more foster parent training.

NEW ICPC REPORT FOR "GO KITS"

The Interstate Compact on the Placement of Children (ICPC) Emergency Report is regularly produced and sent to every district office. The report gives information about children placed in each district office catchment area. Over the last year the report has been improved as anomalies were reported. The ICPC Report is sent monthly with the Children In Placement Report to be

included in each supervisor's "Go Kit". A similar report may be prepared for youth under the Interstate Compact for Juveniles now that CPS and JJS are merging.

JUNIPER

Juniper is a software product that allows staff to access work related computer systems from their home computers. Improvements have been made to the process in which Juniper is available. Several planning sessions have occurred between DCYF and DHHS staff in the past. However, Juniper is not available for emergency preparedness at this time but it is hoped that it will be available in the future.

REPORTING CHILD ABUSE: TRAINING FOR DISASTER BEHAVIORAL HEALTH RESPONSE TEAM (DHBRT) MEMBERS

DCYF continues to receive requests for training about mandatory child abuse reporting laws from the Disaster Behavioral Coordinator, New Hampshire Homeland Security and Emergency Management. The training request was initiated after an incident occurred with a member of the Disaster Behavioral Health Response Team (DBHRT). DBHRT members are individuals with experience in human services such as psychology, mental health, substance abuse, spirituality, etc. They are trained to provide interventions at times of disaster such as behavioral health needs assessments, psychological first aid, crisis intervention, community outreach, disaster behavioral health planning and networking and community resiliency training. All trainings have been well attended and have been well received. DCYF continues to support the Disaster Behavioral Health Response Team (DBHRT).

CONTACTS WITH STATES BORDERING NEW HAMPSHIRE

New Hampshire continues to support cooperation and disaster preparation planning with all New England States especially those states that share common borders with New Hampshire. A request for technical assistance has been submitted to federal child care officials in Region I to assist New Hampshire in planning and coordinating our response to a multi-state disaster such as a hurricane.

UPCOMING YEAR (GOALS & ACTIVITIES)

DCYF will continue to prepare supervisors, staffs, foster parents, residential and child care providers for limited disasters over the next year by:

- Attending planning and information meetings monthly with the DHHS Emergency Services Unit regarding preparations for potential natural disasters and disasters related to two nuclear power plants or other facilities.
- Updating the DCYF Disaster Response Plan (DRP).

- Making efforts to contact residential facilities, ask them about their emergency plans and provide technical assistance if it is requested
- Reviewing and updating the SYSC Disaster Response Plan.
- Conducting at least two desktop exercises at selected district offices perhaps as part of a DHHS exercise.
- Integrating Juvenile Justice into disaster preparation plans and desktop exercises.
- Developing a strategic child care plan.
- Supporting the Disaster Behavioral Health Response Team by providing training on abuse/neglect laws and practices.

THE BUREAU OF INFORMATION SYSTEMS (NEW HAMPSHIRE BRIDGES)

The Bureau of Information Systems (BIS) coordinates ongoing improvements, training, and technical assistance for DCYF's Statewide Automated Child Welfare Information System (SACWIS), known as New Hampshire Bridges.

New Hampshire Bridges is the DCYF and DJJS system of record. All required information is recorded in this application. The system is actively used by all case carrying staff and their supervisors, as well as administrative staff.

Bridges provides the input capability and data structures necessary to capture and store essential data. This includes demographic data for victims of alleged abuse and neglect as well as other individuals involved in referrals, assessment and family service cases. Bridges documents interviews, assessments, findings, and authorizations for placement and other services and payment records.

New Hampshire submitted the Advance Planning Document (APDU) for the New Hampshire Bridges application to ACF. The final APDU was approved by ACF in March 2009. With this approval, the New Hampshire Department of Health and Human Services has completed the full cycle of planning, design, development and implementation of a Statewide Automated Child Welfare Information System (SACWIS) to federal compliance standards.

Over the past several years, many significant enhancements have been made to the Bridges system. These changes have been driven by the 2004-2009 Child and Family Services Plan (CFSP), the statewide Program Improvement Plan (PIP), the AFCARS Improvement Plan (AIP), requirements of the Childcare Development Fund (CCDF), and other changes to state and federal laws and policies.

Other recent enhancements to New Hampshire Bridges included the final phase of updates to the New HEIGHTS Title IV-E Interface to improve the funding process for DCYF and the implementation of DCYF's Parental Reimbursement Unit and implemented the process required for House Bill 407 Data Destruction successfully. Along with these changes the Bridges

application has been modified to reflect the new District Office re-alignment and the replacement of the claims entry system "KeyMaster" has been completed.

In addition to these changes, BIS has coordinated with the Child Protection Bureau, and the Bureau of Organizational Learning and Quality Improvement to develop significant enhancements aimed at redesigning the Structured Decision Making tool (New Hampshire Integrated Assessment Model – NHIA) within Bridges to match the new Solution-Based Case practice. Also, the federally mandated project, National Youth in Transition Database (NYTD) was implemented. Ongoing modifications to the Bridges application and testing have been completed for the upcoming interface with the new Medicaid Management Information System (MMIS).

Other significant enhancements during the last several years included work on the AFCARS Improvement Plan (AIP). The AIP is derived from the assessment review performed by the Administration for Children and Families and provides requirements to be incorporated into the Bridges case management system and AFCARS extract criteria. This plan is being implemented in phases and the last phase will be completed in 2013. The changes to both the case management system and the AFCARS extract criteria are designed to improve the quality and integrity of the data being reported, provide more accurate measures in the State Data Profile to be used in the CFSR and depict a comprehensible view of New Hampshire protection and prevention outcomes.

CHILD MALTREATMENT DEATHS

The response below was developed in collaboration with New Hampshire's NCANDS contact and is taken from New Hampshire's State Commentary Template for FFY 2011:

Sources

Data for the Agency File were obtained from the New Hampshire Department of Justice as well as the New Hampshire Statewide Automated Child Welfare Information System (NH Bridges).

There is no use of "other" with regard to fatalities. The state reports fatalities (unduplicated) in both the Agency and Child files.

THE FISCAL UNIT (BUREAU OF ADMINISTRATIVE OPERATIONS)

The Bureau of Administrative Operations (Fiscal Unit) provides administrative support to DCYF and DJJS staff on procurement of equipment and supplies, posting and advertising of positions, budgeting, analysis of expenditures, cost allocation support, revenue enhancement and cost containment efforts, and preparation of various fiscal reports on a standard and ad hoc basis. The Bureau of Administrative Operations is also responsible for certification, enrollment and rate setting for community-based and residential service providers. The Bureau of Administrative Operations also provides the contracting and program eligibility functions for the divisions. The

bureau is also responsible for the Parental Reimbursement activities for DCYF and DJJS. These activities described in more detail are as follows:

- Provider Relations: Review the invoices from DCYF/DJJS providers to ensure that services were provided, and if the services were provided, process the invoices for payment. Research requests from providers concerning reimbursements for services provided. Also, monitor claims payment and adjust payments as appropriate.
- Procurement: Ensure that the field and State Office have the equipment, cell phones, printed materials, and office supplies needed to function effectively. Request waivers for equipment when appropriate. Maintain an equipment inventory including an annual physical review of all equipment.
- Maximize Federal Revenue: Maximize federal revenue by monitoring eligibility statistics and ensuring that all the paperwork is completed to satisfy federal eligibility criteria, ensuring providers are enrolled as New Hampshire Medicaid providers, and that the annual Medicaid time studies accurately reflect the clinical practice in each facility.
- Other Revenue: Maximization of other sources of revenue by applying for Social Security, Child Support payments, and Veterans Administration benefits on behalf of children in placement.
- Rate Setting: Establish rates for all services for providers used by DCYF and DJJS by requesting budgets from providers, analyzing the budget submissions for appropriateness, and negotiating with the providers regarding their rates.
- Cost Containment: Facilitate and participate in the Resource Management Committee meetings, where service utilization trends are analyzed and corrective actions are implemented as needed. The top 100 most expensive cases are reviewed on an annual basis to ensure that services are monitored.
- Federal Financial Reporting: Review, monitor and/or compile expenditures associated with each federal grant. Submit federal expenditure reports for each grant as required.
- Client Program Eligibility: Review federal guidelines for eligibility, train DCYF and DJJS staff concerning eligibility requirements, and ensure that all of the paperwork is completed to satisfy federal eligibility criteria on a case-by-case basis.
- Personnel Related Functions: Prepares the Human Resources (HR) change request forms (170's) to relay to HR that a position will become vacant, to post and to fill positions for DCYF and DJJS field staff. Provides the fiscal information for all personnel related waivers.
- Certification and Enrollment of Providers: DCYF and DJJS field staff notifies the Bureau of Administrative Operations when they have identified a provider that they would like to be certified to provide services to our clients. The Bureau of Administrative Operations sends out a certification packet to the provider and reviews the completed documents. If all of the paperwork has been completed correctly another bureau within DCYF ensures that the provider meets all of the requirements outlined in rule for that particular service. If all of the criteria are met, the application package is returned to the Bureau of

- Administrative Operations to enroll the provider in our Statewide Automated Child Welfare Information System (NH Bridges) system.
- Provider Evaluation and Compliance: The Bureau of Administrative Operations staff, along with other DCYF and DJJS staff, conduct evaluations of provider service provision and compliance reviews. These reviews evaluate program effectiveness and compliance with federal and state regulations.
- Contracting, Grant Management, and G&C/Fiscal Processing: Develop, with program staff, Requests for Proposals (RFP's), applicable timelines, and manage the competitive bid process from RFP development through contract approval and execution. Including the approval for payment of invoices received from providers for contracted services after review by the Program Manager.
- Cost Allocation: Establish the accounting systems to maintain, monitor, and report on expenditures. Review and modify the Random Moment Time Study materials to ensure that staff costs are distributed to the correct funding sources. Revise the Public Cost Allocation Plan on an annual basis to ensure that costs are allocated correctly, and create new funding allocation methods as appropriate.
- Budgeting and Analysis of Expenditures: Provide data to DCYF and DJJS Management
 to create, analyze and monitor budgets. Analyze expenditures and use of services to
 develop improvements to best practice guidelines, to implement changes in practice, to
 identify populations served and to compare services provided to outcomes achieved.
- Parental Reimbursement: The bureau establishes written agreements with the parent(s) or seeks court orders for reimbursement from parents when services, placements, and programs have been provided. Reimbursement for the services provided is based on the family's ability to pay as determined by the Reimbursement Unit and/or courts. Monitor the payments received from parents to ensure that payments are received as requested.
- Accounts Receivable: Establish repayment schedules for overpayments such as service providers, staff's personal use of state issued cell phones and education reimbursement for staff that received free tuition, but left DCYF services prior to fulfilling their employment obligation. Monitor to ensure that payments are received as required, and take appropriate actions if the payments are not received as required.

BUREAU OF LEGAL SERVICES

The Department of Health and Human Services, Office of Operations Support (OOS) provides legal services for DCYF. That office assigns attorneys to the various divisions within the department to meet the particular division's legal needs. OOS attorneys are part of a "matrix" management system by which they report both to the division to which they are primarily assigned and to the Chief Legal Counsel for DHHS in OOS.

There are twenty-one attorney positions currently assigned to DCYF. Nineteen of these positions are located in the eleven DCYF district offices and the telework unit around the state. The remaining two attorney positions are located at the State Office in Concord. In addition to

the attorney positions, two paralegal positions are currently assigned to DCYF to provide litigation support for the DCYF Manchester and Rochester District Offices. The Rochester paralegal position is currently vacant.

Attorneys assigned to DCYF handle abuse and neglect cases, guardianship cases, and surrender of parental rights cases and termination of parental rights cases in the District Courts, Family Division Courts and Probate Courts throughout the state. They also prosecute de novo appeals in the Superior Courts from the District or Family Division Courts' findings and they assist the State Attorney General's office with the preparation of cases on appeal to the Supreme Court.

DCYF OVERSIGHT PANELS

DCYF supports the functions of a variety of oversight panels including the Citizen's Review Panel and DCYF Advisory Board. In combination, these groups meet the requirements of CAPTA and Title IV-B, in addition to New Hampshire statutory requirements. Their membership is diverse and includes representation from community members, school personnel, youth in care, CASA, foster parents, attorneys, group home staff, representatives from prevention programs, and other professionals who have involvement with or knowledge of DCYF and DJJS.

The DCYF Director attends each group's meetings as often as possible, and the Bureau of Well-Being provides a liaison to each. The role of the liaison is not to drive the agendas of any group, but to provide information on DCYF programs, including identified areas needing improvement or issues that a particular group may be interested in addressing.

THE DCYF ADVISORY BOARD

The DCYF Advisory Board is a requirement of the New Hampshire Legislature, RSA 170-G: 6. This Board has a required membership of two citizens per county and has historically taken a systemic view of agency practice and policy. As a result of ongoing conversations between the DCYF Liaison and members of the DCYF Advisory Board and Citizen's Review Panel, the groups decided to merge and combine their efforts. While there are some differences in the missions of each group, there were far more mutual goals between the groups.

In April 2011, the DCYF Advisory Board and Citizen's Review Panel merged. In November 2011, a strategic planning meeting was held with DCYF, the DCYF Advisory Board and the Citizen's Review Panel. In that meeting, the goals for 2012 were developed and the group decided that a topic would be chosen for each month. Topics presented to and discussed by the board in 2012 have included:

- Changes in New Hampshire Children In Needs of Services (CHINS) Statute;
- Practice Model Primer;
- A tour of the Sununu Youth Services Center (SYSC); and

 A joint presentation by DCYF and CASA on pressing legislative matters impacting DCYF

After the presentations the board determines how they will proceed with that particular issue in their ongoing advising and assisting in improving DCYF practice.

In recent years, membership of the DCYF Advisory Board has decreased. To address this DCYF is working with the board to address membership and recruitment concerns during our monthly meetings. A membership subcommittee has been created to provide a sustained attention to developing a comprehensive, well-rounded board.

THE CITIZEN'S REVIEW PANEL

In April 2011, the Citizen's Review Panel (CRP) merged with the DCYF Advisory Board. As stated in last year's APSR, the goal of this merge was to strengthen each board's respective voice and collaborate with like-minded individuals. Each board has a common desire to focus on service array and quality assurance within DCYF. Each board has kept its own identity and mission; however their efforts have been merged and focused on having a more powerful impact on child welfare practice. The DCYF Director attended the first couple of meetings after the merge and attends on a periodic basis as her schedule permits. The purpose of the CRP is to determine how the state child welfare agency (DCYF) is effectively discharging its child protection responsibilities.

The CRP is required to review the compliance of DCYF in the discharge of its duties with respect to the following:

- The state CAPTA Plan;
- Coordination with Title IV-E foster care and adoption programs;
- Activities associated with CFSR;
- Participation in the DCYF case practice review process;
- Participation in debriefings on Quality Assurance Specific Case Reviews; and
- Other criteria the panel considers important.

In the event that a fatality or near fatality occurs that is connected to a DCYF case or assessment, the DCYF Child Protection Administrator engages in a critical incident review. The results of this review are shared with the CRP upon request.

The 2012 Citizen's Review Panel Annual Report is attached in the appendix.

In addition to the two groups described above, DCYF also supports the Youth Advisory Board and the Child Fatality Review Committee.

NEW HAMPSHIRE TEEN VOICES

The DCYF/DJJS Youth Advisory Board, known as New Hampshire Teen Voices, is composed of young adults currently and previously in out-of-home care. The Board's mission is "making a difference for youth in care by voicing opinions for positive change." The board is composed of five regional teams that meet individually on a monthly basis and quarterly as one group to work on a variety of projects of interest to youth in care. DCYF solicits feedback from New Hampshire Teen Voices for practice changes along with policy and program development. The Board also provides leadership experience to youth who participate in panel discussions and trainings provided to peers, agency staff, placement providers, and community professionals. The Board publishes a quarterly newsletter and conducts an annual teen conference for DCYF and DJJS youth. The Board has also been instrumental in helping to create legislative change to better the lives of youth in care. A previous example of this has been their role in passing the Tuition Waiver Legislation. For more information on the activities of New Hampshire Teen Voices, please refer to the adolescent program description.

THE NEW HAMPSHIRE CHILD FATALITY REVIEW COMMITTEE

The New Hampshire Child Fatality Review Committee (CFRC) was created by Executive Order in 1991. The mission of the committee is to reduce preventable child fatalities through systemic multidisciplinary review of child fatalities in New Hampshire; through multidisciplinary training and community-based prevention education; and through data-driven recommendations for legislation and public policy.

The committee membership is comprised of representation from the medical, law enforcement, judicial, legal, victim services, public health, mental health, and child protection and education communities. The committee began reviewing cases of child fatalities in January of 1996. After each review the committee identifies risk factors related to the death and makes recommendations aimed at improving systematic responses in an effort to prevent similar deaths in the future. The committee provides the recommendations to the participating agencies and asks them to take actions consistent with their own mandates. The committee publishes the recommendation and the agency responses to those recommendations in an annual report.

COORDINATION WITH JUVENILE JUSTICE

Until recently the Division for Children, Youth and Families (DCYF) and the Division for Juvenile Justice Services (DJJS) operated as distinct divisions under the Department of Health and Human Services (DHHS). The divisions have a history of collaboration in real and demonstrable ways, including a joint Case Practice Review process, the use of the same case management information system, a shared service array, and a joint case planning policy for families involved with both systems. As a result of the 2003 and 2010 CFSR, both agencies have prioritized improvements in permanency through concurrent planning, specific practice improvements, and collaboration with the courts. This work will be strengthened through the

development of the state's practice model. In 2011, both divisions were moved under the leadership of one Director (DCYF Director Maggie Bishop), which was meant to enhance our commitment to strengthening the Divisions for Children, Youth and Families and Juvenile Justice Service's efforts in training, service delivery, philosophy, and budgeting. This will provide Juvenile Justice and Child Protection field staff the stability in leadership they need and deserve.

On June 5, 2012 the two divisions officially merged within DCYF officially, establishing the Bureau of Juvenile Justice Service within the Division for Children Youth and Families. This aligns the bureaus of child protection and juvenile justice under the umbrella of DCYF and paves the way for our commitment to moving forward with integrated policies and procedures that bring consistency, while continuing to value and preserve the specialized knowledge and practices in Child Protection, Juvenile Justice Field services and the Sununu Youth Services Center.

This clearly supports our ongoing commitment to moving forward jointly in field practices, systemic integration, and collaboration with partners and stakeholders. Through the analysis of the State Data Profile, agency leaders and managers are using timely, accurate data to analyze child and family outcomes. Priority efforts continue and include working closely with the courts, residential and community-based service providers, staff, parents and youth to enhance data collection and outcomes measurement that drive vital practice changes.

COLLABORATION WITH THE COURTS

In order to fully understand the context in which child welfare and juvenile justice services are delivered in New Hampshire, it is critical to understand the court structure and judicial environment.

As of 2004, legislation was signed into law to consolidate jurisdiction for all family-related matters, which had been handled in the Superior, District and Probate Courts, into a single statewide Judicial Branch Family Division. There are currently twenty-four Family Division locations in nine counties in New Hampshire that deal with matters impacting families. The Family Division has jurisdiction to hear cases involving divorce, parenting disputes, child support, domestic violence, termination of parental rights, abuse and neglect cases, and child in need of services, delinquencies, and adoptions. There are currently ten full-time judges, nine full-time marital masters and ten part-time judges who work regularly in the Family Division. Approximately 1000 children per year are alleged in court records to be victims of abuse or neglect.

In New Hampshire an out-of-home placement requires a court order. This court action was identified in 2003 as a barrier to permanency due to timeframes for hearings and the lack of court focus on permanency issues. We have worked with the courts on protocols and are actively involved in a Model Court project that expedites the process to assure better outcomes. These have been statute changes that expedite the process so families achieve permanency.

Court Appointed Special Advocates (CASA) volunteers are the court appointed Guardian ad litem for most child protection cases. In New Hampshire, CASA is a private, non-profit organization that is responsible for ensuring the best interests of the child in child welfare and juvenile court matters.

COURT IMPROVEMENT PROJECT (CIP)

In New Hampshire the state Child Welfare Agency (DCYF) and CIP Coordinator have maintained meaningful, ongoing collaborations that have clearly resulted in each system being able to successfully identify and work toward shared goals and activities. New Hampshire engages in multidisciplinary work to plan and carry out Cross-System Training. Through this collaboration we have created the ability and the structure to provide ongoing training across the state as needed to assure that future changes in staff within any system could receive training on the court guide.

There are and have been many joint statewide learning opportunities and program initiatives that are based on the collaborative efforts of DCYF and the CIP, including ongoing grant applications and strategic plans. In New Hampshire there is a true partnership between DCYF and the CIP Coordinator that has resulted in improved practices and improved relationships between both the DJJS/DCYF Director and the courts. These relationships have enhanced current initiatives and program activities by assuring a continued commitment to permanency for children and families.

The New Hampshire District Court, Family Division, Probate Court and Superior Court, the Division for Children, Youth and Families, representatives from the Bar, Legislature, CASA, Judicial Council, law enforcement and the Attorney General's Office continue to partner in addressing solutions to child safety, permanency and well-being when families are involved in the Court system because of child abuse or neglect, child delinquency or status offenses.

The Protocols Relative to Abuse and Neglect Cases and Permanency Planning was made possible through a federal grant received by the New Hampshire Administrative Office of the Courts from the U.S Administration for Children and Families. This exciting grant opportunity allowed the New Hampshire District Court to develop and oversee the Court Improvement Project (CIP). In addition to solution-based collaboration among the key partners listed above, foster parents and service providers also contributed to this endeavor.

In 2007, the Court Improvement Project received a grant to improve data collection and outcome measurement. The DCYF Director, Director of CASA and BQI Administrator worked collaboratively with CIP staff to develop performance indicators related to the timeliness of court hearings.

For eleven years the scope of New Hampshire's Court Improvement Project has been on abuse and neglect cases and the development of and training on the Protocols Relative to Abuse and Neglect Cases and Permanency Planning Protocols and standard court order forms for abuse and neglect cases. The success of these efforts, including a strong collaboration with DCYF, CASA and other system participants, served as a model as the CIP expanded in 2007 its scope to include cases that involve delinquents and CHINS.

MODEL COURT PROJECT

In July 2008, the CIP's Coordinator was asked by the supervisory judge of the Concord Family Division to develop and submit an application to the National Council of Juvenile and Family Court Judges for two courts, Concord and Franklin Family Division, to become Model Courts. The application resulted in New Hampshire being selected in August 2008 to become a Model Court. The CIP's Coordinator continues to play an active role in the Model Court Project and CIP funds will be used to support this exciting opportunity, which will include the development of Protocols for termination of parental rights and adoption cases.

NEW LEGISLATION - PERMANENCY AND MEDIATED ADOPTIONS

Mediated Adoption

Legislation allowing birth and adoptive families to enter into voluntarily mediated adoption agreements went into effect on January 1, 2006. Specific information can be found in New Hampshire RSA 170-B:14 Arrangements Between Adoptive and Birth Parents.

Mediated adoption allows for legally enforceable agreements for ongoing communication or contact that is in the best interest of the child, recognizing the parties' interests and desire for ongoing communication or contact that is appropriate given the role of the parties in the child's life. The agreement can be enforced or modified by bringing an action in court, however the moving party must first certify that they have participated in mediation or attempted in good faith to participate in mediation to resolve the issue. From 2006 to present there have been over three hundred mediations in New Hampshire. These mediations serve to allow the parties to voice their opinions about what they want for the child's future and to facilitate a faster permanency plan of adoption.

Since the passage of this legislation, DCYF has collaborated with Casey Family Services and the Office of Mediation and Arbitration regarding training around voluntary mediated agreements and family engagement. Through the Commissioner's Adoption Advisory Committee DCYF Adoption and permanency staffs have been involved in a variety of initiatives related to mediation. These were highlighted in the 2009 APSR.

Permanency Legislation

On January 1, 2008, Governor Lynch signed a comprehensive piece of permanency legislation, Senate Bill 152, into law. The goal of the new permanency legislation is to reduce the length of time until permanency is achieved for all children involved with DCYF or DJJS.

The law also requires that at each review hearing the court must determine whether DCYF has made reasonable efforts to finalize the permanency plan that is currently in effect for the child and to consider "whether services to the family have been accessible, available and appropriate". This finding is also required at all review hearings held for CHINS cases.

- 1. **Permanency Hearing**: The law establishes in statute a requirement for a permanency hearing for abuse and neglect cases as well as cases that involve delinquents and CHINS. Additionally, the law requires the court to determine whether reasonable efforts have been made to finalize the permanency plan that has been in effect and to consider "whether services to the family have been accessible, available and appropriate".
- 2. **Post-Permanency Hearings**: The law provides for a post-permanency hearing to be scheduled annually in child protection cases as long as the child remains in an out-of-home placement. There is also an opportunity for additional hearings at any time upon the court's motion or upon the request of any party. The law also includes a requirement that the court determine whether DCYF has made reasonable efforts to finalize the permanency plan that is in effect and to consider "whether services to the family have been accessible, available and appropriate".

Ongoing CIP, DCYF and CASA Collaboration

The CIP's Coordinator has a strong working relationship with DCYF and CASA and throughout 2008 had regular meetings with representatives from both organizations. These discussions resulted in the CIP, DCYF and CASA identifying a need to bring together DCYF and CASA to discuss the roles and expectations of DCYF and CASA as well as issues related to visitation. The result was an important collaboration by the CIP, DCYF and CASA to collaborate on an annual one-day Summit held for staff from DCYF and CASA and guardians ad litem. The Summit was led by DCYF's Director and CASA's Executive Director and continues to result in overwhelmingly positive evaluations and improved relations between the two organizations and consistency of practice.

THE ATTORNEY GENERAL'S TASK FORCE ON CHILD ABUSE AND NEGLECT

The Attorney General's Task Force on Child Abuse and Neglect was established in 1989 with statewide representation from the medical, mental health, legal, law enforcement, victim advocacy, and forensic science and child protection communities. The Task Force's mission is to improve the identification, investigation, assessment, prosecution and treatment of child maltreatment cases in New Hampshire.

In 1993, the Task Force introduced the first multidisciplinary protocols titled: Child Abuse and Neglect: Protocols for the Identification, Reporting, Investigation, Prosecution and Treatment. A second revised edition of the protocols was developed in 1998. In 2007 a Child Abuse Protocol Revision Committee was convened that included professionals who handle child abuse and neglect cases and other professionals who are essential partners in the interdisciplinary approach to child abuse and neglect investigations. The third revised edition of the protocol was finalized in 2008. This Protocol represents a model - an ideal - for New Hampshire's handling of child abuse and neglect cases. It was developed with the recognition that an individual agency's ability to follow the recommended guidelines, will depend, to some degree on available resources. The purpose of this protocol is to define a standard to which all agencies involved in the handling of these cases should strive. The goal is to provide a safe environment for the

evaluation of child abuse and exploitation, coordinated services to victims and families and community education.

The Attorney General's Task Force has been instrumental in supporting legislation that lead to the development of a Child Advocacy Center (CAC) in all ten counties. These efforts lead to the establishment of the New Hampshire Network of Child Advocacy Centers (NHNCAC). NHNCAC's purpose is to promote an integrated, multidisciplinary team (MDT) response to child abuse throughout the state. Through support of member CAC's, the NHNCAC ensures that children and families have access to the high quality, comprehensive, specialized and culturally competent services of a CAC. A strong focus of the NHNCAC is to provide training, technical assistance and professional support for CAC programs and multidisciplinary teams.

During the 2006 New Hampshire legislative session, the NHNCAC in collaboration with the Attorney General's Office, the Department of Health and Human Services (DHHS), the Task Force on Child Abuse and Neglect and law enforcement worked to pass Senate Bill 370, which allows for the sharing of information between the multidisciplinary professionals involved in a CAC and mandates that a comprehensive statewide protocol be developed on the investigation and handling of cases of child abuse and neglect.

DCYF is a core member of the multidisciplinary investigative teams throughout New Hampshire using a child advocacy center in conducting child abuse and neglect investigations. Currently there are ten operating Child Advocacy Centers in New Hampshire some with more than one location. The CAC locations are as follows: Greater Lakes CAC, Laconia; Carroll County CAC, Wolfeboro; Monadnock Region CAC, Keene; CAC of Grafton and Sullivan Counties at DHMC, Hanover, Littleton and Plymouth; Hillsborough County CAC, Nashua and Manchester; CAC Of Rockingham County, Portsmouth and Derry; Strafford County CAC, Dover; Coos County CAC, Berlin and Merrimack County CAC, Concord.

Recognizing the critical importance of training in the investigative team interview process, a subcommittee of the Attorney General's Task Force on Child Abuse and Neglect was formed to create a protocol training to assure that DCYF staff and law enforcement officials throughout the State were duly informed of the revised protocols. The DCYF Child Protection Administrator was a key partner in developing and delivering the training in collaboration with a member of law enforcement, a medical professional, county attorney, child advocate and crisis center representative. Between December 2008 and May 2009 over 400 professionals, including DCYF staff from the eleven district offices and the telework unit was trained in the revised protocol. It is anticipated that consistent compliance with the procedures set forth in this protocol will greatly increase the effectiveness of the state's response to child abuse and neglect.

PROGRAM EXPENDITURES

ACTIVITIES AS A RESULT OF RECEIVING ADOPTION INCENTIVE PAYMENTS.

During FY 2011, DCYF received \$265,000.00. \$26,422.55 was used to recruit and support adoptive families. DCYF will continue to re-assess our usage of future funds based on allotment and needs of our adoptive families.

TITLE IV-B

Planned Expenditures

DCYF assures that funds expended in each of the service categories under title IV-B, subpart 2, Promoting Safe and Stable Families are provided for services defined under this grant, and are not disproportionately diverted to other service areas that are more suitably provided for through other funding streams. This is consistent with ongoing DCYF practice since funds through Title IV-B were originally received. During the 2010-2014 planning period, DCYF will continue to distribute Title IV-B; subpart 2 funds by 20% proportionally among the following service areas:

• Family Preservation

Programs funded under this service area will include <u>Comprehensive Family Support</u>, the <u>Domestic Violence Specialist Program</u>, and the Family Connection Center.

• Family Support

Programs funded under this service area will include <u>Comprehensive Family Support</u>, the <u>Community and Faith Based Initiative</u>, <u>Watch Me Grow</u> and the Family Connection Center. Like other services, these programs are selected for funding through a competitive Request for Proposals (RFP) process. These services are provided through local community agencies, and many of the services are provided to families in their own homes.

Time Limited Family Reunification

Programs funded under this service area will include Comprehensive Family Support, the <u>Family Assessment and Inclusive Reunification (FAIR)</u>, the Domestic Violence Specialist Program, and the <u>Transportation to Reunification</u> program.

Adoption Promotion and Support

Programs funded under this service area will include the Community and Faith Based Initiative, services provided for adult adoptees (adoption search), and those provided to adoptive families through the <u>post-adoption program</u>. Through a revised contract for foster parent recruitment and retention, and ongoing support of the Foster and Adoptive

Parent Association (FAPA), new techniques will be explored to increase the availability of resource families, relative caregivers, respite care providers and foster/adoptive parents. Please also see specific goals under the Adoption/Post-Adoption Program.

DCYF has addressed gaps in the services array through the distribution of funds for Comprehensive Family Support across the state. Many of these services are provided in the family's home, which improves access in rural areas where transportation may be a barrier. DCYF has also worked with other agencies to increase the use of telemedicine for consultation and training, particularly in the area of children's behavioral health. There are still challenges with regard to access to evidence-based behavioral health services for children and families across the state, and DCYF will continue to work with other DHHS agencies to meet these needs.

Past Expenditures

During FFY 2010, PSSF funds were used for:

Community-Based Family Support Services, Family Preservation, and Time-Limited Reunification

- Comprehensive Family Support Programs
- The Finding Connections Program
- Administrative Case Reviews
- Support of the Foster and Adoptive Parent Association
- First Step LADC Program
- Domestic Violence Specialist Program

Adoption Promotion and Support

- New Hampshire Community and Faith Based Initiative
- Foster and Adoptive Recruitment and Retention Contract: Casey Family Services
- The Finding Connections Program
- Administrative Case Reviews
- Support for adult adoption searches

PAYMENT LIMITATIONS – TITLE IV-B, SUBPART 1

In FY 2005, the State expended no Title IV-B subpart 1 or non-federal funds for childcare, foster care maintenance or adoption assistance payments.

PAYMENT LIMITATIONS – TITLE IV-B, SUBPART 2

The New Hampshire State and local share of spending in 1992 for Title IV-B, subpart 2 programs was \$300,000. In FY 2009, \$368,423 was outlaid by state and local resources for the purpose of supporting Title IV-B activities. This quantity was greater than the FY 1992 base amount of \$300,000.

FINANCIAL AND BUDGET INFORMATION

Electronic copies of the CFS forms are provided on the pages that follow. Signed assurances have been provided to ACF as part of the printed materials.

CFS-101, Part I: Annual Budget Request for Title IV-B, Subpart 1 & 2 Funds, CAPTA, CFCIP, and ETV Fiscal Year 2013. October 1, 2012 through September 30, 2013

| Fiscal Year 2013, October 1, 2012 through September 30, 2013 | | | | | |
|--|---|--|--|--|--|
| 1. Stale or Indian Tribal Organization (ITO): New Hampshire | 2. EIN: 1-026000618-B3 | | | | |
| 3. Address: NH Department of Health & Human Services, Division for Children, Youth and | 4. Submission: | | | | |
| Families, 129 Pleasant Street, Concord, NH 03301 | [X]New | | | | |
| | [1 Revision | | | | |
| 5. Total estimated title IV-B Subpart 1, Child Welfare Services (CWS) Funds | \$1.049.684 | | | | |
| a) Total administration (not to exceed 10% of title IV-B Subpart 1 estimated allotment) | \$104,968 | | | | |
| 6. Total estimated title IV-B Subpart 2, Provides Safe and Stable Families (PSSF) Funds, This | \$104,908 | | | | |
| amount should equal the sum of lines a - f. | \$665,587 | | | | |
| a) Total Family Preservation Services | \$133,117 | | | | |
| b) Total Family Support Services | \$133,117 | | | | |
| c) Total Time-Limited Family Reunification Services | \$133,117 | | | | |
| d) Total Adoption Promotion and Support Services | \$133,117 | | | | |
| e) Total for Other Service Related Activities (e.g. planning) | \$119.806 | | | | |
| f) Total administration (FOR STATES ONLY: not to exceed 10% of title IV-Bsubpart 2 estimated | \$13,313 | | | | |
| allotment) | 210,010 | | | | |
| | \$42.040 | | | | |
| 7. Total estimated Monthly Caseworker Visit (MCV) Funds (FOR STATES ONLY) | \$42,049 | | | | |
| a) Total administration (FOR STATES ONLY: not to exceed 10% of estimated MCV allotment) | | | | | |
| | \$4,204 | | | | |
| 8. Re-allotment of title IV-B subparts 1 & 2 funds for States and Indian Tribal Organizations: | ******* | | | | |
| | | | | | |
| a) Indicate the amount of the State's/Tribe's allotment that will not be required to carry out the following | ig programs: | | | | |
| CWS \$, PSSF \$, and/or MCV(States only)\$ | | | | | |
| | | | | | |
| b) If additional funds become available to States and ITOs, specify the amount of additional funds the | States or Tribes requesting: CWS | | | | |
| \$100,000, PSSF \$100,000, and/or MCV(States only)\$35,000 | | | | | |
| 9. Child Abuse Prevention and Treatment Act (CAPTA) State Grant (no State match | | | | | |
| required): Estimated Amount plus additional allocation, as available. (FOR STATES ONLY) | \$140,244 | | | | |
| 10. Estimated Chafee Foster Care Independence Program (CFCIP) funds | | | | | |
| • • • • | \$500,000 | | | | |
| a) Indicate the amount of State's or Tribe's allotment to be spent on room and board for | | | | | |
| eligible youth (not to exceed 30% of CFCIP allotment) | \$35,000 | | | | |
| 11. Estimated Education and Training Voucher (ETV) funds | \$91,461 | | | | |
| 12. Re-allotment of CFCIP and ETV Program Funds | 4,51,100 | | | | |
| W W | | | | | |
| a) Indicate the amount of the State's or Tribe's allotment that will not be required to carry out CFCIP | | | | | |
| Program | \$ | | | | |
| b) Indicate the amount of the State's or Tribe's allotment that will not be required to carry out ETV | | | | | |
| Program | \$ | | | | |
| c) If additional funds become available to States or Tribes, specify the amount of additional funds the | | | | | |
| State or Tribe is requesting for CFCIP Program | \$150,000 | | | | |
| d) If additional funds become available to States or Tribes, specify the amount of additional funds the | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| State or Tribe is requesting for ETV Program | \$50,000 | | | | |
| | \$30,000 | | | | |
| 13. Certification by State Agency and/or Indian Tribal Organization. | | | | | |
| The State agency or Indian Tribe submits the above estimates and request for funds under title IV-B, subpart 1 and/or 2, of the Social Security Act, | | | | | |
| CAPTA State Grant, CFCIP and ETV programs, and agrees that expenditures will be made in accordance with the Child and Family Services Plan, which | | | | | |
| has been jointly developed with, and approved by, the Children's Bureau. | | | | | |
| Signature and Title of State/Tribal Agency Official Signature and Title of Central Off | ice Official | | | | |
| | | | | | |
| Maggin Bridge | | | | | |
| Of the state of th | | | | | |
| | | | | | |

CFS-101, Part II U. S. Department of Health and Human Services Administration for Children and Families

CFS-101 Part II: Annual Estimated Expenditure Summary of Child and Family Services

| State or Indian Tribal Organization (ITO |) New Hampsl | hire | | | | | I | | OBER 1,2 | 2012 TO S | SEPTEMBER 30, 2013 | |
|--|----------------|-----------------|-----------------|-----------|-----------|----------|--------------|--------------|------------|-----------|---|-----------|
| | | | | (q) | (c) | (f) | (g) | (h) | (| i) | 0 | (k) |
| | | | | CAPTA* | CFCIP | EIV | TITLE IV- | STATE, | NUMBE | R TO BE | POPULATION TO BE | GEO |
| | | TITLE IV-B | | I | | | E | LOCAL, & | SER | VED | SERVED | AREA |
| SERVICES/ACTIVITIES | (a) Subpart I- | (b) Subpart II- | (c) Subpart II- | 1 | | | l | DONATED | individual | Families | 1 | BE |
| | CWS | PSSF | MCV * | | | | l | FUNDS | | l | | SERV |
|) PREVENTION & SUPPORT SERVICES | | | | | | | | | | | A C II II DOWN | |
| AMILY SUPPORT) | \$97,964 | \$133,117 | | \$25,159 | | | | \$64,060 | 25500 | 8500 | Any family with a DCYF assessment | Statewid |
|) PROTECTIVE SERVICES | \$37,435 | | | \$60,188 | | | | \$24,406 | 10625 | 3500 | Families receiving LADC & DVS services | Statewic |
| CRISIS INTERVENTION (FAMILY | 421,112 | | | 400,000 | | | | 40.4 | | | Families receiving LADC & DVS | |
| RESERVATION) | \$84,067 | \$133,117 | | \$34,934 | | | | \$63,030 | 10625 | 3500 | services | Statewic |
| YTIME-LIMITED FAMILY | | | | | | | | | | l | Families receiving LADC, DVS & | l |
| EUNIFICATION SERVICES | \$177,460 | \$133,117 | | \$19,963 | | | | \$82,635 | 12750 | 4250 | FAIR services | Statewic |
|) ADOPTION PROMOTION AND | | | | | | | | | | | | |
| UPPORT SERVICES | \$233,473 | \$133,117 | | | | | | \$91,648 | 4000 | 2000 | Kids in cam/fam. nocv. post- adopt | Statewic |
|) FOR OTHER SERVICE RELATED CTIVITIES (e.g. planning) | so | **** | | | | | | \$29.952 | 30000 | 10000 | Planning & QA to improve serv. | Statewic |
|) POSTER CARE MAINTENANCE | 34. | \$119,806 | | | | | | \$29,952 | 30000 | 10000 | in agency | Statewic |
| (a) POSTER FAMILY & RELATIVE | | | | | | | | | | l | Children in foster care and | l |
| OSTER CARE | \$321,321 | | | | | | \$1,054,480 | \$1,054,480 | 417 | 417 | foster/adopt families | Statewid |
| (b) GROUPINST CARE | \$0 | | | | | | \$2,408,962 | | 237 | 237 | Children in group care | Statewid |
|) ADOPTION SUBSIDY PMTS. | \$0 | | | | | | \$3,945,816 | | 1398 | | Adopted children and families | Statewic |
| .) GUARDIANSHIP ASSIST. PMTS. | \$0 | | | | | | \$0 | \$0 | 0 | | No sub Guard. | N/A |
| D.) INDEPENDENT LIVING SERVICES | \$0 | | | | \$500,000 | | \$442,086 | \$141,468 | 401 | _ | Eligible Youth | Statewic |
| 1.) EDUCATION AND TRAINING | | | | | | | | | | | | |
| OUCHERS | \$0 | | | | \$0 | \$91,461 | \$107,580 | \$38,729 | 45 | 45 | Eligible Youth | Statewic |
| 2.) ADMINISTRATIVE COSTS | \$0 | \$13,313 | \$4,204 | | | | \$5,856,826 | \$5,856,826 | | | | |
| 3.) STAFF & EXTERNAL PARTNERS | \$0 | \$0 | | so | so | so | \$393,359 | \$393.359 | | | | |
| RAINING 4.) POSTER PARENT RECRUITMENT & | \$0. | 30 | | 344 | 34. | 30 | \$393,339 | \$393,339 | | | | |
| RAINING | \$0 | \$0 | | \$0 | | | \$131,120 | \$131,120 | | | | |
| 5.) ADOPTIVE PARENT | - | | | | | | | | | | | |
| ECRUITMENT & TRAINING | \$0 | \$0 | | \$0 | | | \$131,120 | \$131,120 | | | | |
| 6.) CHILD CARE RELATED TO MPLOYMENT/TRAINING | \$0 | | | | | | \$0 | \$0 | 16000 | 9250 | CCDF and TANF Funds | Statewic |
| 7.) CASEWORKER RETENTION. | 34. | | | | | | 30 | şu. | 10000 | 7330 | PARTY AND TARRE PRINT | A PARTY N |
| ECRUITMENT & TRAINING | \$97,964 | \$0 | \$37,845 | | | | | | | | | |
| B.) TOTAL | | | | | | | | | | | | |
| , | \$1,049,684 | \$665,587 | \$42,049 | \$140,244 | \$500,000 | \$91,461 | \$14,471,349 | \$14,457,611 | | | | |

^{*} States Only, Indian Tribes are not required to include information on these programs

CFS-101, PART III: Annual Expenditures for Title IV-B, Subparts 1 and 2, Chafee Foster Care Independence (CFCIP) and Education And Training Voucher (ETV): Fiscal Year 2010: October 1, 2009 through September 30, 2010

| State or Indian Tribal Organization (ITO): New Hampshire | 2, EIN:1-026000618-B3 | 3. Address: NH Depa | artment of | Health & | Human Servi | ces, Division for Children, |
|--|-----------------------|---|-------------|-------------|--------------------------------|-----------------------------|
| 4. Submission: [X] New [] Revision | | Youth and Families, | 129 Pleasa | int Street, | Concord, NH | 03301 |
| Description of Funds | Estimated | Actual | Number | served | Population | Geographic area served |
| | Expenditures | Expenditures | Indistigate | Familier | served | |
| 5. Total title IV-B, subpart 1 funds | \$1,078,061 | \$678,533 | 21000 | 7000 | Reports of Abuse or Neglect | Statewide |
| a) Total Administrative Costs (not to exceed 10% of title IV-B, | | | | | | |
| subpart 1 total allotment) | \$107,806 | \$83,323 | | | | |
| 6. Total title IV-B, subpart 2 funds (This amount should equal the | | | | | | |
| sum of lines a - f.) | \$637,995 | \$1,132,890 | | 7000 | Hilgible Parnilles | Statewide |
| a) Family Preservation Services | \$127,600 | \$214,369 | | | | |
| b) Family Support Services | \$127,599 | \$214,369 | | | | |
| c) Time-Limited Family Reunification Services | \$127,599 | \$214,368 | | | | |
| d) Adoption Promotion and Support Services | \$127,599 | \$214,368 | | | | |
| e) Other Service Related Activities (e.g. planning) | \$114,839 | \$191,937 | | | | |
| f) Administrative Costs (FOR STATES: not to exceed 10% of | | | | | | |
| total title IV-B, subpart 2 allotment after October 1, 2007) | | | | | | |
| | \$12,759 | | | | | |
| 7. Total Monthly Caseworker Visit Funds (STATE ONLY) | \$37,885 | \$37,885 | | | | |
| a) Administrative Costs (not to exceed 10% of MCV allotment) | | | | | | |
| | \$3,788 | \$3,788 | | | | |
| 8. Total Chafee Foster Care Independence Program (CPCIP) | | 4 . 4 | | | | |
| funds | \$500,000 | \$465,248 | | | | |
| a) Indicate the amount of allotment spent on room and board for | | | | | | |
| etigible youth (not to exceed 30% of CFCIP allotment) | | | | | | l |
| | \$35,000 | \$19,387 | ø | 63 | Digitic Youth | Statewide |
| 9. Total Education and Training Voucher (ETV) funds | \$98,847 | \$100,114 | | | Highle Youth | Statewide |
| Certification by State Agency or Indian Tribal Organization (I Services Plan, which has been jointly developed with, and approve | | | nditures w | ere made | in accordance | with the Child and Family |
| Signature and Title of State/Tribal Agency Official | Date | Signature and Title of Central Office Official Date | | | | Date |
| Mayor Bridge | | | | | | |

APPENDICES

DCYF HEALTH CARE SERVICES PLAN

Introduction

New Hampshire's oversight and coordination of health care services for foster children begins when children first enter foster care. Each child receives a comprehensive health and developmental assessment within thirty days of placement. Foster Care Health Nurses, funded by Medicaid, act as Healthcare Consultants to ensure that every child in relative or foster placement has their medical, behavioral, and oral health needs met. Tools that have been developed to assist in the statewide oversight of healthcare are:

- The Foster Care Health Care Program monthly report: This tracks the basic medical and dental care as well as the initial health and behavioral health care assessments; and
- The New Removal Report: This report identifies all new removals for a two-week period of time, to assist in scheduling of the initial health and behavioral health assessment.

The Foster Care Health Program was recognized as a "Promising Approach" by the Administration for Children and Families in February 2008 because it promotes improved safety, permanency and well-being outcomes for children.

Schedule for initial and follow-up health screenings that meet reasonable standards of medical practice

Behavioral Services

Within thirty days of placement, the child must receive a mental health assessment. The Referral for Behavioral Health Services Form is used to document a child's behavioral health status that may include: observed or documented depression, substance abuse, suicide potential, and the traumatic circumstances surrounding the child's removal from home. Each child must receive an assessment in accordance with New Hampshire Medicaid requirements and the certification payment standards for community-based behavioral health service providers. This assessment is performed by the Community Mental Health Centers by an agreement between DCYF and the Bureau of Behavioral Health. This agreement also includes consultation time from the clinician designated to do these assessments at the DCYF office for any case that CPSWs need some additional behavioral health assistance or insight for.

Medical Services

When the health screening by the CPSW/JPPO or medical examination identifies a medical problem, illness, or injury, treatment must be arranged or initiated for the child within forty-eight hours.

Within forty-eight hours of placement, children under the age of two must have a comprehensive health and developmental assessment completed by a medical professional.

Within thirty days of placement, children over the age of two must have a comprehensive health and developmental assessment completed by a medical professional.

Each child must receive medical examination consistent with the Early Periodic Screening, Diagnosis and Treatment (EPSDT) schedule and the American Academy of Pediatrics (AAP) Recommendations for Preventive Pediatric Health Care.

Dental Services

Each child must receive a dental examination consistent with the EPSDT schedule and AAP.

Recommendations for Preventive Pediatric Health Care

The Foster Care Health Care Program continues today to provide high-level health care planning, behavioral, medical and dental care coordination to DCYF children in foster care by continuing to work with experts within DHHS and community providers. DCYF has developed a Foster Care Health Advisory Committee, which will be making recommendations for the medical, dental and behavioral health care of foster children, as well as being available for consultation.

How Health Needs Identified Through Screenings Are Monitored and Treated

When the initial health screening identifies a medical problem, illness, or injury, treatment must be arranged or initiated for the child within forty-eight hours. Foster Care Health Care Nurse Consultants monitor the needs of the child by:

- Consulting with CPSWs to ensure that the medical care and health care planning is done and documented.
- Consults with the CPSW on the coordination of health care visits, exams, and treatment;
- For children with complicated health care needs, coordinate the health care and document the health care plan.
- Review the Foster Care Health report to ensure that each foster child's basic Medical, Dental and Behavioral health assessments are complete and documented.

For children with complex medical needs a health care plan is developed after the comprehensive exam is completed and used to identify the needs of the child and the recommendations of the child's medical providers, dentist, or mental health specialist. The plan identifies the child's health needs, a timeline for meeting needs, who will be responsible for meeting the needs and describes how and by whom services will be provided. The plan is updated as the child's needs change and medical services are provided.

Currently, DCYF is working to amend case plans to better incorporate medical and dental health care needs for all children in care.

DCYF has also implemented a new Administrative Case Review process called, Family Assessment and Inclusive Reunification (FAIR). FAIR is a form of family team meeting where all the issues that brought a child into care are discussed as a team with the parents and their supports immediately after the child is removed from the home. During the FAIR meetings, the child and family's well-being needs are discussed and reviewed including medical and dental needs, current providers and schedules for well child visits.

Parents must be involved, whenever possible, in the treatment of the child's identified medical needs. If the parents have a Primary Care Physician (PCP), ongoing medical care is continued with the child's PCP unless the child's placement is too far away. If the child does not have a family physician or pediatrician, a Medicaid provider is identified for the child who can provide the initial and ongoing medical services needed by the child.

How Medical Information Will Be Updated and Appropriately Shared

Initial efforts to obtain medical information are made with the parents by the CPSW when a child must be removed from his or her home. If information is provided by the parent(s), the CPSW makes contact with the child's medical provider(s) to obtain the child's medical records. Information is also collected at the time of the FAIR meeting. Foster parents or other providers participate in FAIR as well.

Whenever a child changes provider or returns home, updated health care information is provided to the new provider or parents and entered into the Bridges information system. Health care plans, when completed for medically complex children, are updated every six months, whenever possible. Efforts are being made to establish a medical record in the division's Statewide Automated Child Welfare Information System system.

Goal: To develop a tool that will consistently pull medical information from the Medicaid Billing system for children in foster care. The report being used currently in practice utilizes information from the Statewide Automated Child Welfare Information System (New Hampshire Bridges).

In the fall of 2010 the Foster Care Health report was finalized and is being run and dispersed to the Nurse Consultants as well as the local District Office Supervisors for management of medical, dental and behavioral health care services for children in foster care. This report assists in the oversight of the medical care and the documentation of the medical care for all children in foster care. This report is run every month and identifies which children have up-to-date medical appointments. This information is documented in New Hampshire Bridges system. This item is complete and is being enhanced with the development of the psychotropic medication oversight report.

Steps To Ensure Continuity of Health Care Services

The foster care health program policy states that the child, while in care and when feasible, must remain with his or her current medical provider. CPSWs are responsible for keeping a foster

child's medical and dental record up to date in the New Hampshire Bridges system as well as in a paper record. The nursing staff is responsible to provide training, consultation, and support and program oversight in all the medical information of children in foster care.

The Foster Care Health Nurse Consultants currently have access to the New Hampshire Medicaid information system. For children in care who were covered by New Hampshire Medicaid at the time of their removal from home, the Nurse Consultants can access this system to identify which medical professional may have served that child, if the parent did not or could not provide this information at the time of removal.

The Oversight of Prescription Medicines

DCYF has had a process in place for a number of years for the prior authorization for the prescribing of psychotropic and narcotic medication for children in Guardianship or Care, Custody and Control. The process for this prior authorization includes the prescribing practitioner must seek permission for narcotic, psychotropic and other prescriptions from the DCYF Director or an authorized DCYF Administrator. This is done in consultation with the Nurse Consultant prior to making the authorization.

For all other foster children, parents must be contacted for permission for their child to receive a prescription. Parental engagement is key to encouraging parents to continue to assume responsibility for their child's health care, while in out of home care. Parent engagement is a strong focus for the Division with the inclusion of Solution-Based Casework, FAIR meetings and the development of the Parent Partner Program. It is the Division's plan to continue to encourage that relationship between parent and child while in care and to work with the parents to increase their ability to meet their children's needs. Part of the division's plan will include educational material and tools to assist parents in making informed decisions with regards to the use of psychotropic medications. When it is not possible for parents to be involved, the foster parent or child placing agency and the DCYF worker must ensure the child's needs are met.

DCYF is currently beginning to develop a report from the Medicaid claims system so that the Foster Care Health Program can use this report to more closely monitor children's prescriptions as well as view on a larger scale, the prescribing practices by provider or by placement on a state level. Currently DCYF is still working with the Medicaid office to develop a standardized report for Prescription drug use and management.

DCYF's plan for monitoring the use of psychotropic medication:

Consent:

For children and youth in DCYF custody or supervision:

Every effort is made to have the parents involved in health care planning and medical appointments, including behavioral health treatment. For children who may be prescribed psychotropic medications, the parents are giving informed consent and provide that consent for their children while in care.

(When parents are not engaged or available) When Parents are not available, the parent signs a Medical Authorization and release at the time of the placement of the child in foster care.

Goal: To create a new authorization specific to the prescribing and administration of psychotropic medication for children in foster care.

For children and youth in DCYF guardianship or care, custody and control:

For this group of children and youth, the director or the three designees that are allowed to provide consent, give informed consent. DCYF policy states that prior authorization or signed consent must be given prior to any use of psychotropic or narcotic medication or when any changes to current psychotropic or narcotic medication are necessary. DCYF has a specific form for this purpose that requests information from the prescribing practitioner describing the necessity of the addition or change to the medication being prescribed.

Goal: Make adjustments to the prior authorization form that will provide more information to the person giving informed consent. Additional information may include, other therapies, medication or behavioral interventions that have been or are being employed to assist in symptom reduction.

Review and ongoing monitoring:

Statewide Data report

New Hampshire DCYF is currently working on the creation of a statewide data report for all children and youth in custody and guardianship. The report will identify any all children that are prescribed and taking any psychotropic medications. This data report is being created through the New Hampshire Medicaid system utilizing the prescription claims data. This report has been created with the help of the Office of the Medicaid Business and Policy group. This report will help identify cases that will require further review by a child psychiatrist contracted by the Division, by using the following key indicators:

- Children under the age of eight using psychotropic medications;
- The use of Polypharmacy, or children and youth on more than one or two medications at one time;
- The prescribing practitioner is a primary care physician and the medication prescribed is something other than ADHD medications; and
- Dosing exceeds best practice parameters.

Further data points to be included in the report will be:

- Child/youth's demographic information from the New Hampshire Bridges system;
- Placement type; and
- Placement provider name and location, to track trends of psychotropic medication use among placement providers.

When a case is identified for review; the child psychologist will conduct a medication review.

Goal: To review baseline report for accuracy, make any necessary changes, determine scope of issue for New Hampshire and modify plan based on the preliminary results.

Support and Education:

Training:

- Develop training for Foster Parents, Residential staff, CPS and JJS staff regarding the use of psychotropic medication, the plan for oversight, and any further guidelines adopted by the division.
- Incorporate policy, guidelines, form and statistics into provider and staff trainings.

Supporting documents or information:

Develop a set of targeted questions for placement provider or parent to use when speaking with the prescribing practitioner, about starting or adjusting a psychotropic medication. Questions may include:

- What symptoms will this medication impact?
- When should parent/provider/ child or youth notice a difference in symptoms?
- What are the side effects, and
- When would any side effects start to appear?
- Are there any other alternative interventions?
- Plan for discharging the medication.

Create policy/guidance to providers about psychotropic medication use:

- Medication as a tool to assist in alleviating symptoms;
- Child/ youth is still responsible for his/her behaviors and actions;
- Medication is ideally used in concert with therapy most appropriate for child/youth's diagnosis, ideally trauma informed therapy;
- Adjust the psychotropic consent form for guardianship cases to include Medication discharge plan, therapies child/youth is receiving in addition to the medication; and
- Create a new release for parents to sign that targets the prescribing and administration of psychotropic medications.

How New Hampshire Actively Consults With and Involves Physicians or Other Appropriate Medical or Non-Medical Professionals in Assessing the Health and Well-Being of Children in Foster Care and in Determining Appropriate Medical Treatment for the Children.

The Foster Care Health Program Nurses are able to consult with the State Senior Physician, in the Medicaid office of Special Medical Services. The State Senior Physician provides direct

clinical consultation to the Health Care Nurse Coordinators as well as provides periodic clinical training at the monthly Health Care Nurse Coordinators meeting.

Goal: Consult with the office of Medicaid business and policy and special medical services to identify any current medical oversight committee that include community medical professionals as well as department of health and human services clinical staff, that may be interested in reviewing the foster care health program on a continuous basis

As of February of 2010, DCYF implemented the Foster Care Health Advisory Committee. This committee is comprised of medical and non-medical participants. The Office of Public Health, Medicaid business and policy, external medical providers as well as family advocacy groups are participating in this committee. This committee will look at DCYF's practices around the overall medical care for foster children as well as look at systemic issues such as the use of psychotropic medicines for foster children and available service array for all parts of the state.

This oversight committee will be able to review the Foster Care Health Program's practice and procedures to ensure best practice in the areas of Medical, Dental and Behavioral health. This committee can provide expertise for issues that may be pertinent to the health of children in foster care, such as building available resources and identifying barriers to consistent care. This group can also review program policies to ensure these policies adhere to recommended practice in these fields.

Selection of Health Care Experts and Involvement of The Medicaid Agency

DCYF developed the Foster Care Health Program in 1999 with medical experts from the Medicaid Program in DHHS and with private providers of community-based health care and with providers recruited to identify and treat abused and neglected children at the time of an assessment. Behavioral health providers were involved through the DHHS community mental health centers.

DCYF and the Medicaid program are agencies in the same Department. This allows DCYF easy access to medical professionals in the Medicaid program. At the same time DCYF has adopted Medicaid standards for children in foster care and requires DCYF certified providers to be certified by Medicaid.

Community-based health and behavioral health providers participated in meetings with DCYF to identify needs of foster children and to identify what worked well and what could be done to improve care for foster children.

The Foster Care Health Program nurses are able to consult directly with the DHHS State Senior Physician for a case specific oversight as well as ongoing clinical direction and training.

NYTD Policy Requirements

On September 21, 2010, New Hampshire DCYF released Policy Directives (PD) about youth exiting residential and foster family care at age eighteen or older. Youth are encouraged to learn more about advance directives (power of attorney and living will) to be included in their 90 Day

Youth Transition Meeting and Plan. The new Advance Directives Form, prepared by the Foundation for Healthy Communities, provides youth a description of advance directives available in New Hampshire. Youth will be provided with a copy of the Advanced Directives Form 2599 and the Advance Care Planning Guide. This policy is based on the Patient Protection and Affordable Care Act (PL 111-148) of 2010, which aims (in part) to help youth make a successful transition to adulthood.

ANNUAL REPORTING OF STATE EDUCATION AND TRAINING VOUCHERS AWARDED

Name of State: New Hampshire

| | Total ETVs Awarded | Number of New ETVs |
|---|--------------------|--------------------|
| Final Number: 2010-2011 School Year (July 1, 2010 to June 30, 2011) | 26 | 17 |
| 2011-2012 School Year* (July 1, 2011 to June 30, 2012) | 19* | 10 |

Comments: *One additional youth received a small amount of ETV in the 2011-2012 school year but elected not to attend college.

Twenty additional youth formerly in DCYF care attended college in 2011-2012 supported either by our Tuition Waiver program or by a scholarship from NHHEAF (New Hampshire Higher Education Assistance Foundation.

CITIZENS REVIEW PANEL ANNUAL REPORT 2012

Below is the report submitted by Michael Adamkowski Chairperson of the New Hampshire DCYF Advisory Board and Citizens Review Panel.

The Citizens Review Panel and the DCYF Advisory Board have merged. Interested members of the Citizens Review Panel have been able to join the DCYF Advisory Board. This has enabled both boards to increase membership and expand each board's knowledge base.

The combined boards set an agenda for the first six months of this year. The board was able to tour the youth detention center and learn about treatment options for those individuals. The board heard from Byry Kennedy who was able to talk with us about the Parent Attorney changes this year that came about due to new legislation. We heard from Erica Ungarelli who spoke with us regarding changes to the Child in Need of Services statute and how that affected the 409 kids receiving services under that. We spent two meetings discussing new membership and reformed the membership committee. We have several potential new members in the process of joining the board. We heard from Todd Crumb about the Practice Model and its roll out to DJJS. We discussed the system of care and changes to the residential services for kids and families.

The combined boards have provided feedback from all the counties represented at each meeting. We have been able to have good discussions about specific cases and community developments. This also provides the DCYF with another voice in their work.

As we move forward we hope to fill the vacant slots on our board, continue to review the Practice Model and CFSR reviews. We will also be keeping an eye on systems changes and expanding in to other areas that DCYF has a role in.

At this time we have two recommendations for DCYF. They are that as a board we be kept informed of changes to the practice model and that members who are interested be periodically invited as a stakeholder reviewer for the DCYF Case Practice Reviews.

Michael Adamkowski DCYF Advisory Board Chair

DCYF Response: DCYF remains committed to continuously informing the Citizen's Review Panel and Advisory Board of key changes and updates regarding the implementing of DCYF's Practice Model.

DCYF Response: DCYF currently involves at least one stakeholder as a reviewer during Case Practice Reviews. A concerted effort will be made over the next year to include a member of the Citizen's Review Panel/Advisory Board as a stakeholder reviewer during a Case Practice Review.

DCYF DISASTER RESPONSE PLAN



State of New Hampshire Division for Children, Youth and Families

Disaster Response Plan

February 2007

Department of Health and Human Services DCYF 129 Pleasant Street, Concord, New Hampshire 03301 Phone 800-852-3345 • Fax 603-271-472

Introduction

his plan is designed to go into effect when a disaster (under 10 days) interferes with the day-to-day operations of the Division for Children Youth and Families. While procedures spell out by unit or function what can be done in preparation for a disaster or when a disaster strikes, it is not a substitute for sound judgment and capable leadership. Leadership is the responsibility of the state and district office leaders and will be necessary to guide staff and DCYF clients when normal operations are interrupted. Coordination between DCYF and the various units of DHHS is essential to effectively prepare and respond to disasters.

Each section of the plan needs to be implemented for staff to be prepared as well as possible for disasters that might interfere with the normal operations of DCYF. Implementation means:

- 1. Gathering and making available emergency information to supervisors and administrators;
- 2. Training staff about emergency procedures;
- 3. Establishing periodic reports of key client information for supervisors and administrators;
- 4. Reviewing and updating, periodically, this plan to improve the division's ability to respond to disasters; and
- 5. Establishing specific procedures with DHHS to coordinate preparations for and responses to disasters.

The plan will be activated when ordered by the DCYF Director or designee and when a district office can no longer follow division policy and the office's usual operating procedures. This plan will end when the office can resume its usual operating procedures or when given a new operations plan by the DCYF Director or designee.

The plan is based on the work of the Disaster Planning Committee of state and district office representatives and the following articles. (See APPRENDIX. for full text.)

- 1. Coping with Disasters: Tips for Child Welfare Agencies Spring, 2006,
- 2. Coping With Disasters: A Guide for Child Welfare Agencies, Jan 1995,
- 3. Disaster Preparedness for Families Children with Special Needs, Florida Institute For Family Involvement 2006 and
- 4. Lessons Learned for Protecting and Educating Children after the Gulf Coast Hurricanes, May 11, 2006 United States Government Accountability Office.

Assumptions Made

The division's plan is based on the following assumptions:

- The plan depends on timely communications and effective leadership.
- The plan applies to all hazards and not a specific event.
- The Continuity Plans identify the division's priority services.
- The plan is to be used for temporary (under ten days): lost of: power, communications, staff, offices, computers and other resources needed to continue routine operations. (Over ten days, refer to the DHHS continuity of operations plans).
- The plan describes only the general emergency procedures staff will need to follow.
 Supervisors and administrators will need to improvise to meet the specific conditions of an actual disaster.
- It assumes DHHS will continue to operate to provide food stamps, TANF grants, Medicaid and other services.
- It assumes that community emergency services will be in place to provide basic necessities of shelter, rescue, evacuation, fire control, transportation, etc.
- It assumes DCYF is participating in the DHHS emergency response system for homeland security and other types of emergencies.
- The plan focuses on DCYF's unique responsibilities for foster children in foster family homes or residential facilities in-state or out-of-state especially special needs children.
- The plan assumes staff and supervisors will be informed and trained on how to implement emergency procedures when disasters strike.
- The plan assumes all personnel will need some level of assistance before, during and after the disaster has passed.
- The plan assumes Bridges will continue to operate and be the central source for most data.
- It assumes DCYF will coordinate this plan with DJJS especially where some offices
 of both divisions are in the same building and where there are joint cases and
 common providers.
- It assumes the plan will be effective only if it is tested and updated.

TESTING, REVIEWING AND UPDATING THE STATE OFFICE AND EACH DISTRICT OFFICE DISASTER PLANS

The maximum effectiveness of this plan is dependent on trained personnel to test the assumptions made and the directions provided. Periodic drills, outcome reviews and updating of information and direction is necessary for leadership and staff to maximize services to clients and to support staff during times of disasters.

CONFIDENTIALITY

This plan includes employee phone numbers and addresses. This information is to be used only as required to implement this plan and is protected under RSA 91-A:5. Exemptions IV of Chapter 91-An ACCESS TO PUBLIC RECORDS AND MEETINGS. Unauthorized use is a violation of the division's Code of Ethical Conduct and subject to disciplinary actions described in New Hampshire Personnel Rules, PER 1000.

DCYF DISASTER PLANNING CHART

| Major Responsibilities | Communications | Tracking/Locating |
|---------------------------------------|---|---|
| Care, custody and guardianship of | Parents, guardians, courts, | Foster children, parents, |
| children in Foster Care (especially | GAL, CASA | guardians and foster parents |
| children with high medical needs) | | |
| Provider payments - Childcare, Foster | All providers and recipients | All providers and recipients |
| Care, Adoptive parents, Community- | | |
| based and Residential Providers | | |
| Intake | General public and | Current address |
| | professionals reporting | |
| | allegations of abuse and/or | |
| | neglect | |
| Assessment | Parents, foster parents, | Current address |
| 7 11 9 | residential facilities | 7 1111 |
| Family Services | Parents, guardians, foster | Foster children, parents, |
| Placement/removal of children for | parents | guardians and foster parents |
| abuse and/or neglect | 9 | 411 D CVIII 11 |
| Information Systems | Supervisors, staff, | All DCYF clients and |
| | administrators, program | providers' information |
| Health information about children in | specialists | All Foster Children |
| | Parents, guardians, foster | |
| foster care | parents | (especially children with high medical needs) |
| DCYF Staff | Supervisors and administrators | / |
| | * | Absent or incapacitated staff |
| Leadership | Director, supervisors, administrators, DHHS | Absent or incapacitated leadership |
| | Commissioner and Incident | readership |
| | Command Center(Emerg Sup | |
| | Function 8 (Health & Medical | |
| | Service)) | |
| | Bet vice)) | |

The chart above identifies major components of the plan. It illustrates the relationships among responsibilities, communications and tracking/locating of clients and staff.

The major responsibilities listed above are critical to the division's mission and legal obligations. When a disaster occurs, the division will strive to fulfill these key responsibilities.

Sharing key information at the time of a disaster requires effective communications with clients, providers, staff and others. The division will use phones, cell phones and the public media (if necessary) to obtain information about children in foster care or children in residential care and to communicate to parents, providers and others the safety, location and well-being of each child.

The division initial work at the time of disaster will be to locate and track clients, providers, staff and others in order to confirm the safety and location of each child and the availability of providers and staff to continue the delivery of services.

Plan by Unit or Function

LEADERSHIP/COMMUNICATIONS

Continuity Plan

The Leadership continuity plan is activated when ordered by the Director or designee.

Emergency Procedures

The Director or designees:

- Provides direction and information to supervisors and state office personnel about actions to take in response to an impending or actual disaster and actions being taken by the Commissioner's Office;
- Informs supervisors to activate the district office continuity plans in response to an impending or actual disaster (such as a hurricane);
- Informs State Office administrators to activate continuity plans in response to an impending or actual disaster (such as a hurricane);
- Uses media to communicate directions to staff, clients and providers when other forms of communications are not available or effective in responding to a disaster;
- Holds an emergency staff meeting within a couple of days of the disaster to update staff on the current situation and ask the staff to identify their needs and the needs of the Office;
- Uses the Central Intake Unit as a DCYF communications center when necessary;
- Coordinates the DCYF plan with the DHHS emergency management unit.

Supervisors:

- Inform staff of current conditions and actions to take:
- Provide direction for continued operations of DCYF programs;
- Implement the district office continuity plans;
- Coordinate their actions with the D.O. Managers of Operations and other DHHS Supervisors; and
- Communicates with DCYF Director or designee.

INTAKE

Continuity Plan

The Intake continuity plan is activated when ordered by the Director or designee and when the Intake Unit can no longer follow its usual procedures.

Intake Supervisor will:

• Determine if it is safe for the CPSWs to report to the Central Intake Office;



- Contact State Office to determine if Intake could be moved to a temporary new site(s) if it's unsafe to report to the Central Intake Office;
- Obtain the status of each district office and their contact information if they have moved to a different site;
- Activate the phone tree to contact staff when staff cannot or should not go to the office or when usual communications cannot be followed;
- Review referrals and give highest priority to Level 1 referrals for assessments;
- Provide paper forms for documenting referrals if Bridges is not available;
- Contact law enforcement when child is in danger and referral cannot be made to a district office:
- Request additional staff when it's not possible to respond to level 1 calls;
- Use Intake as a DCYF communications center when requested by the Director or designee.

Intake CPSWs will:

- Report to the Central Intake Office unless instructed to report to a temporary site by supervisor or State Office;
- Contact local law enforcement when child is in danger and referral cannot be made to a district office;
- Determine as soon as possible if a call is a Level 1 referral;
- Document referrals on paper forms if Bridges is not available.

ASSESSMENT

Continuity Plan

The assessment continuity plan is activated when ordered by the Director or designee and when the district office can no longer follow its usual procedures.

Emergency Procedures

Supervisor will:

- Activate phone tree to contact staff when staff cannot or should not go to the office or when usual communications cannot be followed;
- Review referrals and give highest priority to Level 1 referrals for assessment;
- Determine if it's safe for the CPSW to complete the assessment before, during and after the disaster strikes;
- Provide forms for documentation if Bridges is not operational;

- Assign additional staff (Family Services, Permanency, Adolescent or Foster Care CPSWs) if there is not sufficient assessment staff;
- Establish a core team of staff, if possible, to carry out critical assessment and family services tasks;
- Document delays in Bridges (or on paper if necessary) in responding to all referrals according to policy;
- Instruct staff to work with law enforcement regarding any emergency removals, especially if the courts are not available; (If law enforcement officials are not available, the law allows JPPOs to take emergency custody under RSA 169-C: 6 Protective Custody and RSA 170-G: 16 IV.)
- Triage all other assessment functions for new and open assessments based on child safety and availability of staff;

Assessment CPSW (or assigned CPSW) will:

- Determine best method of conducting the assessment when the standard procedures cannot be followed. For example additional collateral contacts may be made to assure the child is safe when a child cannot be seen in person;
- Notify local law enforcement when there is imminent danger to a child;
- Document all efforts made in Bridges (or on paper) to insure the child's safety;
- Contact his or her supervisor periodically regarding their own safety;

FAMILY SERVICES

Continuity Plan

The family services continuity plan is activated when ordered by the Director or designee and when the district office can no longer follow its usual procedures.

Emergency Procedures

Supervisor will:

- Activate phone tree to contact staff when staff cannot or should not go to the office or when usual communications cannot be followed;
- Assign staff (Family Services, Permanency, Adolescent or Foster Care CPSWs) as needed to check on each foster child's condition, location and ongoing needs;
- Ensure birth and foster parents and residential providers of all foster children in open cases are contacted;
- Review family service cases and confirm the safety of all children with immediate safety issues such as: medically fragile children dependent on life supporting equipment, children

dependent on prescription medications, children in the process of being removed from their homes and all other children.

Family Services CPSWs will:

- Contact all birth and foster parents and residential providers of all children in open cases to collect information about:
 - 1. Their current and future locations,
 - 2. Needs for medical information and/or prescriptions for every child,
 - 3. Any other specific needs they have during and/or after the disaster.
- Provide foster parents information about how to contact DCYF during or after the disaster;
- Contact law enforcement when the courts are not available and a child must be moved for safety reasons from their home or current placement (If law enforcement officials are not available, the law allows JPPOs to take emergency custody under RSA 170-G: 16 IV.);
- Document in Bridges (or on paper if necessary) all delays or postponements of case plan required activities, child and parent visits, court hearings, administrative reviews, etc.;
- Contact his or her supervisor periodically regarding his/her own safety.

FOSTER PARENTS

Disaster Planning

When a disaster strikes, these are some of the things you can do before, during and after the disaster.

Prior to a disaster

Foster Parents can:

- Meet with your family and discuss why you need to prepare for disasters. Explain the dangers of fire, severe weather, and hurricanes to children. Plan to share responsibilities and work together as a team.
- Discuss the types of disasters that are most likely to happen. As a family discuss how this can affect all family members and how you will address **the special needs of persons with a disability**. Explain what to do in each case.
- Notify your local fire and/or police chiefs of any special evacuation needs.
- Pick two places to meet in the event you are separated. You might pick outside your home in case of a sudden emergency such as a fire. Or if you can't return home, you would pick someplace outside of your neighborhood. Everyone must know the address of the "meeting place" and how to contact one another.
- Ask an out-of state friend to be your "family contact" and share this information with your <u>DCYF or DJJS case worker</u>. After a disaster, it's often easier to call long distance. Other family members should call this person and tell them where they are. Everyone should memorize your contact's phone number.
- Discuss what to do in an evacuation. Plan how to take care of your pets.

- Post emergency telephone numbers by phones (fire, police, ambulance, hospital, doctor, poison control, etc.)
- Teach children how and when to call 9-1-1 or your local emergency medical services number for emergency help.
- Show each adult family member how and when to turn off the water, gas, and electricity at the main switches.
- Decide the best evacuation routes from your home.
- Prepare a disaster supply kit (food, water, first aid, etc.) for ten days for your family.
- Identify and have easily accessible health information and medications used/needed for each family member.
- Determine if back up systems are needed for special medical equipment that requires electricity.
- Make sure all medical information is updated and documented.
- Check with your children's school to find out what their emergency plan is.
- Post DCYF or DJJS case worker's number and inform all family members.

If a disaster strikes:

- Stay calm. Put your plan into action.
- Check for injuries and give first aid or get help for seriously injured people.
- Try to reduce your child's fear and anxiety.
- Listen to your battery powered radio for news and instructions.
- Evacuate, if advised to do so.
- Check for damage in your home.
- <u>Use flashlights</u> not candles or lanterns—do not light matches or turn on electrical switches if you think there may be damage to your home.
- Check for fires, fire hazards and other household hazards.
- If you smell gas leaking from your stove, furnace, water heater, or other gas appliance <u>leave your house immediately</u> and contact the gas company or the fire department from a neighbor's house.
- Clean up spilled medicines, bleaches, gasoline and other flammable liquids immediately.
- Put your pets in a safe place.
- Call your family contact—do not use the telephone again unless it is a life-threatening emergency.
- Check on your neighbors, especially elderly or disabled persons.
- Stay away from downed power lines.

- Check food and water to determine if it is still safe to eat and drink.
- Watch animals (both wild and domestic) as they will be confused and scared and may be dangerous.
- Be careful of snakes and insects. They may be on the move looking for new homes or a place to hide.
- Contact your CPSW or JPPO when it is safe to do so and inform the worker of your location and the location and condition of your foster children and how you can be contacted.
- Copied extensively from the Disaster Preparedness for Families of Children with Special Needs, Florida Institute for Family Involvement

SPECIAL INVESTIGATIONS UNIT

Continuity Plan

The Special Investigations continuity plan is activated when ordered by the Director or designee and when the Unit can no longer follow its usual procedures.

Emergency Procedures

Supervisor will:

- Contact each member of the Unit when staff cannot or should not go to the office or when usual communications cannot be followed;
- Determine if its safe for the CPSW to complete the assessment before, during and after the disaster strikes;
- Provide paper forms for documentation if Bridges is not operational;
- Request additional staff if there isn't sufficient staff to complete assigned assessments;
- Document delays in Bridges (or on paper if necessary) in responding to all referrals according to policy;
- Instruct staff to work with law enforcement regarding any emergency removals, especially if the courts are not available;
- Triage all other assessment functions for new and open assessments based on child safety and availability of staff.

Special Investigations' CPSW (or assigned CPSW) will:

- Determine best method of conducting the assessment when the standard procedures cannot be followed. For example additional collateral contacts may be made to assure the child is safe when a child cannot be seen in person;
- Notify local law enforcement when there is imminent danger to a child;

- Notify the local DCYF Office that a child may need to be placed and that it may be necessary to file petitions in the local district or family court;
- Document all efforts made in Bridges (or on paper) to insure the child's safety;
- Contact his or her supervisor periodically regarding their own safety.

RESIDENTIAL SERVICES

Continuity Plan

Emergency Procedures

Residential Providers will:

- Implement the emergency plans developed under the Bureau of Childcare And Standards rules He-C 4001.14 Prevention and Management of Injuries and Emergencies;
- Contact the D.O. CPSW or their supervisor who has responsibility for the child's case management and inform them of the status, needs and location of the child or contact the DCYF central office in Concord if the D.O. is not available;
- Identify placement changes that may be necessary; and
- Provide name and location of new site if re-location becomes necessary.

Supervisors and/or CPSW'S will:

- Document all information received about a child in residential care;
- Contact parents and provide available information;
- Determine if there are available foster homes or other residential facilities for a child who may need to be transferred; and
- Assist in the transfer of the child when requested.

INTERSTATE COMPACT ON PLACEMENT OF CHILDREN

Continuity Plan

The Interstate Compact continuity plan is activated when ordered by the Director or designee and when the Deputy Compact Administrator can no longer follow the usual procedures.

Emergency Procedures

Deputy Compact Administrator will:

- Identify children in the geographic area affected by the disaster;
- Contact the local office responsible for the supervision of the child's placement;
- Obtain information about the child's location and condition;

- Notify the sending state's administrator about the child's location and condition;
- Document any collected information on paper forms (if Bridges is unavailable) about the child and send it to the sending state's administrator when phone service is restored.

STAFF SUPPORT

Continuity Plan

The staff continuity plan is activated when the District Office Supervisor has determined that staff has been impacted by an actual or potential disaster, or other significant event that interrupts usual procedures in that office.

Emergency Procedures

Supervisor will:

- Determine that an event is anticipated or has occurred that has the potential to impact staff's ability to maintain usual procedures in an office;
- Contact DCYF administration regarding employees needs for assistance;
- Assess whether staff may benefit from services of the Employee Assistance Program, the New Hampshire Disaster Behavioral Health Response Team, or other local resources;
- Contact the Employee Assistance Office (271-4336) to request assistance for staff (and if necessary, their families), or to review the local resources the D.O. would like to utilize;
- Arrange a site for the EAP to meet with staff.

CPSWs (or other DCYF staff) will:

- Keep their supervisor informed regarding the impact of a disaster or significant events that may impact their work or pose a safety risk to themselves or to their families;
- Make themselves available to E.A.P. or other designated resources for assistance;
- Contact his or her supervisor periodically regarding his or her own safety, or the safety of their family, if that is at issue.

BRIDGES

Continuity Plan

The continuity plan for the automated case management system, Bridges, relies on IT staff to:

- Perform a hard back up (every Sunday) which is an electronic picture stored in Bridges (This is done at APS on tape); and
- Perform a soft back up (each evening), which is an update of what has occurred that day.

In addition, the Department is developing an emergency plan for backing up all automated systems that includes Bridges.

Evacuees from Boston and Neighboring Massachusetts Communities

Emergency Procedures:

Director or designee will:

- Provide direction and available information about evacuees and possible needs to supervisors;
- Coordinate actions with the Commissioner's Office and the Department's emergency management unit.

Supervisor will:

- Contact the State Office for available information;
- Activate phone tree if emergency occurs during non-business hours;
- Respond to requests for assistance required by evacuees such as registration, foster homes, legal assistance, prescriptions (Red Cross for assistance), etc;
- Identify available foster homes and residential facilities in the D.O. catchment's area able to take children on an emergency basis;
- Coordinate emergency responses with other divisions of the Department;
- Review referrals and give highest priority to Level 1 referrals for assessment;
- Triage all other functions based on the child's safety and availability of staff.

FOSTER FAMILY PROVIDER EMERGENCY PAYMENTS

Continuity Plan

The Foster Family emergency payments plan is activated when ordered by the Director or designee and when usual payment procedures cannot be followed:

Emergency Procedures

The DCYF Financial Administrator or designees will:

- Request a detailed report of all open cases and authorizations in Bridges;
- Prepare manual invoices based on service authorization information;

- Code funding sources for each invoice by checking child's eligibility paper file;
- Forward coded claims to OCOM; and
- Notify county administrators of emergency payments.

Note the Office of Business Operations; Bureau of Finance will give priority to client invoices during an emergency period.

ELIGIBILITY DETERMINATIONS: FOSTER CARE

Continuity Plan

The eligibility determinations continuity plan is activated when ordered by the Director or designee and when eligibility determinations cannot be made following usual procedures.

Emergency Procedures

The Fiscal Services Supervisor will:

- Activate the phone tree to contact Fiscal Specialists when staff cannot or should not go to the office or when usual communications cannot be followed; and
- Instruct specialists to use paper forms for eligibility determinations if Bridges is not operational.

Fiscal Specialists will:

- Run summary reports from New Heights and Bridges to be used as reference if normal computer access is lost;
- Maintain at least two weeks of forms, adequate supplies and computer records to be used if Bridges is not operational;
- Contact his or her supervisor periodically regarding their own safety and ability to do their regular work; and
- Document reasons for unusual delays when eligibility determinations cannot be completed in the usual timeframes.

Chapter 2

Disaster Response Kits

DCYF District Offices

Each district office is to take the Unit and Function Plans and place them in a binder with contact information for staff, supervisors, clients and others as described in the Disaster Response Kit (See outline below). This kit includes up to date client reports periodically generated by Bridges and Foster Workers concerning the location of foster parents and residential facilities and children in their care. It also includes paper forms for Assessments, Family Services, Foster Care eligibility, court forms and other paper forms necessary to document the division's usual work. The kit is to be used when Bridges is not operational or when staff does not have access to Bridges but can carry on their regular work. Supervisors must have access to these kits 24 hours a day in case a disaster strikes when a supervisor is at home.

A second kit needs to remain in the office and be accessible to all supervisors and staff. All supervisors and staff need to be briefed about the contents and use of the kit and reminded of the value of having up to date information especially when disasters strike.

DISASTER RESPONSE KITS

DCYF

District Offices

- 1. Up to date phone numbers, home and e-mail addresses for:
 - S.O. Director, Child Protection Administrator and Assistant Administrators
 - D.O. Supervisors
 - CPSWs
 - DOMOs
 - Support Staff
- 2. Up to date phone numbers, home and e-mail addresses for:
 - Birth parents of children in foster care
 - Foster parents and children in their care

- Foster parents emergency locations
- Residential facilities
- New Hampshire State Hospitals
- 3. Names and phone numbers of schools attended by foster children
- 4. Disaster Continuity Plans
 - D.O. Succession plan
 - Intake plan
 - Assessment plan
 - Family Services plan
 - Foster Parents
 - Special Investigations Unit
 - Residential Services
 - Interstate Compact On Placement Of Children
 - Staff Support
 - Bridges
 - Evacuees From Boston And Neighboring Communities
 - Foster Family Provider Emergency Payments
 - Eligibility Determinations-Foster Care
- 5. Paper forms for Assessments, Family Services, Interstate Compact, etc. if Bridges is not available
- 6. Alert levels

Chapter 3

Alert Notification Systems

Homeland Security Advisories

The Department is participating in the emergency alert system developed by the US Department of Homeland Security. This alert system is activated when there is a potential terrorist attack. Supervisors need to be aware the alert system is a color-coded level system based on the terrorism threat. The alert levels are:

- Yellow—Elevated Risk of Terrorist Attack
- Orange—High Risk of Terrorist Attack
- Red—Severe Risk of Terrorist Attack

•

"Alert Level YELLOW" is now the Department's normal operating posture." For each Alert Level, the Commissioner's Office expects each agency or unit within DHHS to take steps such as ensuring DCYF phone tree is up-to-date to respond to the alert level.

Supervisors will be given information from the DCYF Director or designee to implement the DCYF continuity plans when the alert levels are raised to a higher level.

Supervisors need to review the DCYF and related sections of the Alert System and inform their staff.

A copy of the Alert Levels can be found behind the Homeland Security Advisories tab in this Plan. On the next page is the Operational Levels For Emergencies chart that describes in one place the levels by types of emergencies.

Chapter

Connections to DHHS

The DCYF Disaster Preparedness Plan has been drafted with the understanding that DCYF is dependent on other Department units to complete its work e.g. Medicaid. Interruptions in Medicaid and other Department programs and services will have a serious impact on DCYF clients and operations. For these reasons the DCYF Disaster Preparedness Plan must be coordinated with the Department's Disaster Guidelines for Managers and Staff (See a copy in the APPENDIX). DCYF Supervisors are encouraged to work closely with the district office Managers of Operations (DOMOs) and other DHHS Supervisors in preparing for and responding to disasters.

Chapter 5

Recommendations

- 1. Continue the development and implementation of the DCYF plan.
- 2. Train supervisors and administrators about plan implementation.
- 3. Train staff about emergency procedures.
- 4. Review and update the plan periodically.
- 5. Test the plan periodically.
- 6. Revise the plan, if necessary, when the Department revises its District Office Disaster Guidelines for Managers and Staff.
- 7. Further design the district office plans to reflect local conditions e.g. nuclear power plants, flood prone areas, electrical outages, etc.
- 8. Produce periodic reports regarding the location of foster parents and foster children.
- 9. Work with DJJS to establish plans for: communications with providers, the sharing of client information at the time of a disaster and the temporary re-location of staff.
- 10. Develop and implement plans for informing foster parents and staff about preparing for disasters and what actions (safety, communications, and location) they need to take when a disaster strikes.
- 11. Review a sample of cases to determine if medical information (health status and prescriptions) for each foster child is up to date;
- 12. Work with DJJS and BCCLS to obtain remaining residential provider emergency plans.
- 13. Develop working agreements, especially about sharing confidential information, with the New Hampshire Red Cross and the National Center for Missing and Exploited Children (NCMEC) to locate missing children.
- 14. Work with the Department of Education to obtain emergency plans for each school district.
- 15. Ensure all paper files are in file cabinets with no files in the bottom drawer to avoid damage from minor floods.
- 16. Explore the possibility of developing mutual aid agreements with communities bordering New Hampshire.
- 17. Work with DJJS and/or BCCS&L to review residential facilities such as Cedarcrest to ensure communications, relocation-sites and back up equipment for medically fragile children is in place.
- 18. Research what roles community-based service providers and volunteers can/should play in meeting the emergency needs of clients and the division.

APPENDIX

- District Office Phone Tree
- State Office Phone Tree
- DHHS Disaster Guidelines for Managers and Staff
- Emergency Management Directors by District Office
- Staff, Child and Family Support Information
- Residential Services Emergency Response Plans
- Homeland Security Advisories

REFERENCES:

Child Welfare Matters-Coping with Disasters: Tips for Child Welfare Agencies, Spring 2006

Coping with Disasters: A Guide for Child Welfare Agencies, January 1995

Disaster Preparedness For Families Of Children With Special Needs

Gulf Coast Hurricanes: Lessons Learned for Protecting And Educating Children, May 11, 2006

Preparing For An Emergency: The Smart Thing To Do

ARTICLES

Helping Children and Adolescents Cope with Disasters: Ten ways to help

N.H. Bureau Of Emergency Management: After The Disaster

Coping with Disaster: Tips For Adults

Preparing For An Emergency: The Smart Thing To Do

DISASTER RESPONSE PLAN DISTRICT OFFICE GUIDE

Division for Children, Youth and Families Disaster Response Plan District Office Guide

Review of New Hampshire Disaster Response Plan

Personnel

(When there are significant storms anticipate a request to contact foster parents. Consider the need for temporary placement of children whose parents are seriously ill.)

| Disast | er Response Kits |
|--------|--|
| 1. | Has your Office developed a disaster response kit? Yes No |
| 2. | Where is it located in your Office? |
| 3. | How many kits do you have? |
| 4. | Does a supervisor or other designated person take it home during non-business hours? Yes No |
| 5. | Are there paper copies of forms for Assessments, Family Services, Foster Care eligibility court forms and other essential forms necessary to document the division's work? Yes No |
| Does y | your kit have reports about foster children (including ICPC children): |
| 1. | their location (not only address) Yes No |
| 2. | name(s) of foster parents or residential providers Yes No |
| 3. | alternate location and phone number if they need to evacuate Yes No |
| 4. | biological parents and phone numbers Yes No |
| 5. | names and phone numbers of schools attended by foster children Yes No |
| 6. | How often are your reports updated? Once per week Other |

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| 1. | Have you set-up a phone tree for your supervisors and staff? Yes No |
|-------|---|
| 2. | Do you have phone numbers (cell & or land phones), home (including location) and email addresses for: |
| 3. | DCYF Director Yes No |
| 4. | DCYF Business Operations Administrator Yes No |
| 5. | Child Protection Administrator Yes No |
| 6. | Assistant Administrators Yes No |
| 7. | D.O. Supervisors Yes No |
| 8. | CPSWs in your Office Yes No |
| 9. | DOMO in your Office Yes No |
| 10 | O. Support Staff in your Office Yes No |
| 11 | . New Hampshire State Hospitals Yes No |
| Conti | nuity Planning |
| 1. | Do you have a way of documenting staff work that is directly related to an emergency and not part of their regular assigned duties? Yes No |
| 2. | Are there any staff members that are emergency responders and will not be available for their regular work? Yes No |
| 3. | Are there any staff members who will not be able to work when there is a disaster because they need to care for a dependent family member? Yes No |
| 4. | Have you set up a system for periodically updating this information for your Office? Yes No |
| 5. | Have you set up a system for periodically updating this information and sharing it with State Office? Yes No |
| 6. | |
| | Do you have copies of the Continuity Plans below adapted for your Office? |
| | Do you have copies of the Continuity Plans below adapted for your Office? D.O. succession plan Yes No |

| | Family Services plan Yes No |
|---------|--|
| | • Foster Parents Yes No |
| | Interstate Compact Children Yes No |
| | Staff Support Yes No Foster Care eligibility determinations Yes No |
| 7. | Do you have copies of the alert levels regarding Homeland Security Advisories? Yes_No |
| 8. | Have you reviewed your plan with your Staff? Yes No |
| Staff S | Support |
| 1. | Does your Staff have information about emergency planning for their own families? Yes No |
| 2. | Do you know who to contact to provide assistance for Staff before, during and after a disaster has passed? Yes No |
| 3. | Have you reviewed the Staff, Child and Family Support Information articles with your Staff? Yes No |
| 4. | Have you informed Staff they are expected to continue to work when a disaster strikes even when other DHHS employees may be allowed to stop their work? Yes No |
| 5. | Has your D.O. Disaster Response Plan been reviewed and coordinated with the D.O. Manager of Operations? Yes No |
| Comm | nunity |
| 1. | Have you reviewed the DHHS Disaster Guidelines for Managers and Staff? YesNo |
| 2. | Do you know who the emergency management directors are in your D.O. catchment area? Yes No |
| 3. | Have you made contact with them about medically fragile /functionally needy foster/guardianship children in their city or town? Yes No |
| 4. | Do you have a re-location-site identified if you have to evacuate your Office? YesNo |

| Emergency F | oster Care |
|-------------|------------|
|-------------|------------|

| 1. | Do you have foster parents who would be willing to take in children on an emergency |
|----|---|
| | short-term basis? Yes No |
| | |
| | If yes, how many? |

CAPTA

State: New Hampshire

State CAPTA Coordinator/Liaison: Michael Donati

NH Division for Children, Youth and Families

129 Pleasant Street Concord, NH 03301 603-271-8159

mdonati@dhhs.state.nh.us

Since the development and approval of the 2010-2014 CFSP, there have been no substantive changes in New Hampshire's statutes that could affect eligibility according to CAPTA requirements.

New Hampshire State Statute RSA 170-E:29 sections I, II and II-a mandate both criminal record checks and central registry checks on all adults involved with children, either in licensed child placing agencies, or as household members in licensed foster or adoptive homes. There have been no changes in these policies that would affect eligibility for CAPTA funds.

In response to the CAPTA Reauthorization Act of 2010, New Hampshire re-assessed the current CAPTA State Plan implemented in the 2010-2014 CFSP and developed a new CAPTA State Plan. The new CAPTA Plan adheres to the goals developed as part of the 2010-2014 CFSP, but also recognizes the shifts in practice over the past 2 years and aligns itself with the development and implementation of the practice model and the current mission of our agency. These activities and services supported by this CAPTA Plan also adhere to the coordination of services between CAPTA and Title IV-B grants.

ACTIVITIES, SERVICES AND TRAINING NEW HAMPSHIRE INTENDS TO CARRY OUT WITH CAPTA FUNDS

Intake/Assessment Activities

- Child Advocacy Centers
- First Step: Approaches To The Co-Occurrence Of Child Maltreatment And Substance Abuse
- Parent Partner Program

Collaborative Responses to Multiple Family Issues

- First Step: Approaches To The Co-Occurrence Of Child Maltreatment And Substance Abuse
- Child Advocacy Centers

Improving skills, qualifications, and availability of individuals providing services to children and families

- Parent Partner Program
- Laptop Pilot to improve case management efficiency

PROGRAM AREAS SELECTED FOR IMPROVEMENT

During the development of the new CAPTA State Plan, DCYF facilitated discussions of the 14 CAPTA Improvement Areas with members of the DCYF Management Team. Discussions also occurred with the <u>Citizen's Review Panel</u> and <u>DCYF Advisory Board</u>.

Through the development of the <u>Practice Model</u> and other initiatives, DCYF will address the following CAPTA Improvement Areas:

1. Intake, Assessment, Screening and Investigation of reports of child abuse or neglect.

In effort to continuously improve assessment practice from office to office, the following areas will be supported through CAPTA:

- Support provided to the Child Advocacy Centers in New Hampshire to enable them to better perform their duties.
- Continue to support <u>LADC's</u> in some of our district offices.
- Use CAPTA funds to promote our <u>parent partner program</u> at the local district office level. Specifically, to help pilot a former birth parent to be a part-time DCYF staff member in a district office. This parent would provide education and support in working with birth parents to staff and also provide support and mentoring to birth parents working with the division, beginning with the assessment process.
- CAPTA will also support purchasing laptops and wireless network cards to allow CPSW' and JPPO's the ability to complete computer casework while out of the office. This will promote a more efficient way to complete work throughout the day.

3. Case Management, including ongoing case monitoring, and delivery of services and treatment to children and their families.

Continue to support LADAC's in some of our district offices.

CAPTA will also support purchasing laptops and wireless network cards to allow CPSW's and JPPO's the ability to complete computer casework while out of the office. This will promote a more efficient way to complete work throughout the day and improve the efficiency and effectiveness of our case management services.

By employing birth parents within the district office as mentioned above, DCYF will not only improve our engagement with families during the assessment phase, we will also

improve the quality of work and interactions with families while providing services and case management for our family service cases.

7. Improving skills, qualifications, and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protections system, including improvements in the recruitment and retention of caseworkers.

The main focus of the Division to address this program area of CAPTA is through DCYF's Parent Partner Program. Within this program, DCYF is working to have, through support of CAPTA funds, a part-time parent, who has had previous DCYF involvement, hired in a district office to support birth parents and staff in our work with children and families. This parent partner in the district office will provide support to birth parents when their children have been placed in out-of-home care. This parent partner will also provide training and education to staff on how to best work with birth parents when their child is placed in out-of-home care.

To further enhance our parent partner program, CAPTA funds will be used to support our foster parent/birth parent mentoring program. This involves foster parents mentoring birth parents who have had their children placed in out-of-home care. This support and connection between the foster and birth parent will promote a more positive relationship between the two and serve to further engage both the foster parent and birth parent in the reunification process.

12. Supporting and enhancing interagency collaboration between the child protection system and the juvenile justice system for improved delivery of services and treatment, including methods for continuity of treatment plan and services as children transition between systems.

This marks the only program area change from the CAPTA Plan approved in the 2010-2014 CFSP. While interagency collaboration between the child protection system and the juvenile justice system has been an important mission of the Division, its importance is only magnified as a result of the merge of DCYF and DJJS under one Director in early 2011. Organizationally, DCYF and DJJS are assessing how the agencies can best collaborate; this is primarily through the DCYF/DJJS Practice Model. CAPTA funds will support improving service delivery at a field level for both agencies as described below.

CAPTA funds will be allocated for piloting the use of laptops with wireless cards for some CPSW's in one DCYF Office and some JPPO's in one DJJS Office. The goal of this pilot is to create a more efficient work environment for both agencies and improve case management by providing CPSW's and JPPO's laptops and wireless cards so they can complete casework while in remote locations such as court or residential facilities. This will allow CPSW's and JPPO's to complete work on the computer while waiting for court hearings, residential treatment meetings, etc.

JUVENILE JUSTICE TRANSFERS

Should a child under DCYF custody become involved with DJJS through either a Delinquency or Child in Need of Services (CHINS) petition, DCYF retains custody of the child. DCYF and DJJS collaborate for purposes of joint planning and case management to define the roles and responsibilities of each agency.

Information on Child Protective Service Workforce

For child protective service personnel responsible for intake, screening, assessment, and investigation of child abuse and neglect reports in the State, report available information or data on the following:

(1) Information on the education, qualifications, and training requirements established by the State for child protective service professionals, including for entry and advancement in the profession, including advancement to supervisory positions.

MINIMUM QUALIFICATIONS:

Education: *CPSW I-II* -Bachelor's degree with a major study in social work, psychology, social psychology, sociology, human services, behavioral science, cultural anthropology, counseling, pastoral counseling, or divinity or Bachelor's degree with at least twelve (12) courses or thirty-six (36) credit hours in social work, psychology, social psychology, sociology, human services, behavioral science, cultural anthropology, counseling, pastoral counseling, or divinity. *CPSW III-IV* - Same as above, or a Master's degree with a major study as listed above.

Experience: CPSW I - No experience required. CPSW II— One year's experience as a social worker or professional case manager, preferably in the CPSW profession or in either a public or private agency. CPSW III - Two years' experience as a social worker or professional case manager preferably in the CPSW profession with a Bachelor's degree, or one year's experience as a social worker or professional case manager preferably in the CPSW profession with a Master's degree, with the experience having been gained before or after completion of the Master's degree. *CPSW IV* - Three years' experience as a social worker or professional case manager, preferably in the CPSW profession with a Bachelor's degree, or two years' experience as a social worker or professional case manager preferably in the CPSW profession with a Master's degree, with the experience having been gained before or after completion of the Master's degree.

Special Requirements: Must be available for some non-traditional work hours to meet the needs of the client families and children. A valid driver's license and/or access to transportation for use in statewide travel is required. For appointment consideration, Child Protective Service Worker applicants must successfully participate in a structured interview measuring possession of knowledge, skills and abilities. Applicants' responses to questions asked in the structured interview will be numerically rated.

PROMOTION REQUIREMENTS

1.

In order for a CPSW to be promoted to the CPSW II or III positions, the following must be completed and signed off by the CPSW's Supervisor and the Field Administrator for that district office:

| $\ll E \hbar$ | | NM» «LAST_NM» will be completing one year as ar YEE_TITLE_DESC» on «PROB_END». In order for «FIRST_NM» to be eligible at the state of |
|---------------|--------|---|
| | (A) | Recent satisfactory performance evaluation (attached or on file). |
| | (B) | This employee has completed the following training requirements: |
| | - | Core Training (CPSW I – CPSW II) |
| | - | 30 Hours of Training (CPSW II – CPSW III) |
| | - | A current ITP/ITNA is on file and noted in personnel evaluation |
| positio | n, the | CPSW to be promoted to a CPSW IV position, which is the highest-ranking CPSW following must be completed and signed off by the CPSW's Supervisor and the strator for that district office: |
| | We ar | e recommending that be promoted to a CPSW IV. |
| | The er | nployee has met the following requirements: |
| | | The CPSW IV criteria approved by Human Resources (See Below) |
| | | The employee has a recent satisfactory performance evaluation attached or on file. |
| | | 30 Hours of Training |
| | | A current ITP/ITNA is on file and noted in personnel evaluation |
| CPSW | IV cri | teria approved by Human Resources: |
| | To qu | alify for an upgrade to CPSW IV: |

knowledge of the content of the trainings.

Must have completed the current CPSW Core Training and have a working

- 2. *Must be employed with DCYF for at least three years.*
- 3. Supervisor recommendation must have assistant (field) administrator approval.
- 4. Must have current and thorough Bridges knowledge.
- 5. Must have attained a CPSW III status
- 6. Has not been under a work plan for the past year,
- 7. Is willing and available to mentor and accept supervisory responsibility.

To qualify for a CPSW IV an external applicant:

- 1. Has at least three years experience in a child welfare or related field.
- 2. Can demonstrate the above criteria in a previous employment
- (2) Data on the education, qualifications, and training of such personnel and demographic information of the child protective service personnel.

The table below is information from New Hampshire Bridges related to the education levels of New Hampshire's CPSW Workforce. The table also provides insight on the tenure of CPSWs. Over the coming year, in order to provide a comprehensive view of this new CAPTA requirement, DCYF will be exploring more detailed and reliable data sources to gather a broad spectrum of information relating to CPSW demographics. Furthermore, it is of note that this information is not completely accurate in its reflection on the CPSW Workforce for New Hampshire DCYF. As mentioned above in the Minimum Qualifications section, it is a requirement that every CPSW must possess a bachelor's degree. This table reflects that some of the CPSW staff does not possess a bachelor's degree, which is not accurate.

| Level of Education | # | % |
|------------------------------------|-----|---------|
| Bachelor Level | 145 | 74.74% |
| Masters Level | 30 | 15.46% |
| High School Diploma / Some College | 14 | 7.22% |
| | | |
| Unable to Determine | 5 | 2.58% |
| Total | 194 | 100.00% |
| | | |

| Average years of service with DCYF | 7.8 |
|------------------------------------|-----|
| Median years of service with DCYF | 5.8 |

(3) Information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and supervisor (section 106(d)(10)).

For the New Hampshire Child Protective Services Workforce there is no specific caseload requirement. Child Protection supervisors and administrators do track and report out on the status of current caseloads, average number of cases per CPSW and caseload trends at the district office level. This information is used to inform staffing decisions, assignment of work responsibilities and to assist supervisors in managing personnel and caseload responsibilities within their respective office.

Supervisors, Field Administrators and the Child Protection Administrator receive monthly data reports that include number of protective assessments assigned per month, current number of open cases, number of children in those cases and other statistical data related to practice outcomes. These reports are routinely reviewed at Leadership meetings and used to manage business operations and practice at the local level. Since the reports are designed to report how workloads increase/decrease over time, the CPS Field Administrators use the data to conduct an individual analysis of each district office's workload every six months. This analysis includes a breakdown of the number of staff per office by position type and averages the total number of protective assessments and family service cases managed per worker during that time period. The Child Protection Administrator reviews this information and a comparative analysis is completed to determine which offices are carrying the highest to lowest average number of assessments and cases per worker statewide. These results are used to inform decisions related to staff assignments that may include position reassignment within an office, temporary assignment of catchment areas to another office, permanent transfer of a position to another office and if deemed necessary request to the Director to create new positions.

Examples of these reports are attached at the end of the CAPTA Plan.

(4) If possible, please provide data for Federal FY 2010. Please specify if another time period is used.

The information provided in this section is current as of the writing of this CAPTA Plan.

DIVISION FOR CHILDREN, YOUTH AND FAMILIES

CITIZENS REVIEW PANEL

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CASELOAD ANALYSIS

Laconia District Office July 2011

1 Resource Worker 1 District Office Supervisor

5 Assessment Workers 2 Asst. Supervisors

8 Family Service Workers

14 Workers Total (One Assessment Vacancy)

New Assessments in June 78 Open Cases in June 79 # of Foster Home in June 45

Current Caseload (June)

Assessment: 15.6 per worker for the month; 19.5 with one vacancy

Family Service: 9.87 cases per worker

137 children in open cases = 17.12 per worker

Average over a 5-month period Feb. 2011- June 2011

Assessments 65.8 (February 70; March 75; April 60; May 46; June 78) Open Cases 76.6 (February 83; March 73; April 73; May 75; June 79)

of children in Cases:131.4 (February 141; March 127; April 124; May 128; June 137)

Average Caseload:

Assessment: 13.16 per worker, per month; or 16.45 with one vacancy

Family Service: 9.57 cases per worker;

Average # of children in open cases over 5 months: 16.42 per worker

COMPARISON OF JULY 2011 CASELOAD ANALYSIS BY DO

Assessments

| Office | Average number per worker per month |
|-------------------|-------------------------------------|
| Laconia | 13 |
| Rochester | 13 |
| Keene | 12 |
| Claremont | 12 |
| Concord | 11 |
| Manchester | 11 |
| Southern Telework | 10 |
| Southern | 9 |
| Littleton | 8 |
| Portsmouth | 8 |
| Conway | 6 |
| Berlin | 6 |

Cases

| Office | Average number cases per worker |
|-------------------|---------------------------------|
| Rochester | 12 |
| Keene | 12 |
| Conway | 11 |
| Southern Telework | 11 |
| Concord | 11 |
| Laconia | 10 |
| Littleton | 9 |
| Manchester | 9 |
| Berlin | 9 |
| Southern | 8 |
| Claremont | 7 |
| Portsmouth | 7 |